

Case Number:	CM13-0062027		
Date Assigned:	12/30/2013	Date of Injury:	03/20/2002
Decision Date:	03/20/2014	UR Denial Date:	10/30/2013
Priority:	Standard	Application Received:	10/30/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Occupational Medicine and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient is a represented [REDACTED] employee who has filed a claim for chronic bilateral shoulder and neck pain reportedly associated with an industrial injury of March 20, 2002. Thus far, the patient has been treated with the following: Analgesic medications; attorney representation; transfer of care to and from various providers in various specialties; muscle relaxants; topical agents; and apparent return to work. In a utilization review report of October 30, 2013, the claims administrator reportedly denied a request for Terocin and Flexeril, while approving a request for Naprosyn and Tramadol. The patient's attorney subsequently appealed. In a December 13, 2013, progress note, it is stated that the patient is working on a full-time basis, cleaning trains. The applicant's pain ranges from 1-4/10. She works the graveyard shift. Tenderness about the neck and shoulder is apparently appreciated with left shoulder range of motion limited to 150 degrees. Flexeril, a topical compounded lotion, Naprosyn, and Tramadol are renewed.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Topical compounded Terocin lotion: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 47,Chronic Pain Treatment Guidelines Page(s): 111.

Decision rationale: As noted in the MTUS-adopted ACOEM Guidelines in Chapter 3, oral pharmaceuticals are a first-line palliative method. In this case, there is no evidence of intolerance to and/or failure of first-line oral pharmaceuticals so as to justify usage of topical agents and/or topical compounds such as Terocin which are, per page 111 of the MTUS Chronic Pain Medical Treatment Guidelines, "largely experimental." Accordingly, the request remains non-certified, on independent medical review.

Flexeril 7.5 mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 41-42.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 41.

Decision rationale: As noted on page 41 of the MTUS Chronic Pain Medical Treatment Guidelines, addition of cyclobenzaprine or Flexeril to other agents is not recommended. In this case, the applicant is already using several oral pharmaceuticals, including Naprosyn and Tramadol. Adding cyclobenzaprine or Flexeril to the mix is not recommended. While a lesser amount of Flexeril could have been supported to be used in the event of acute flares of chronic pain, the 60-tablet supply of Flexeril being proposed by the attending provider, conversely, cannot. Since partial certifications are not possible through the independent medical review process, the request is wholly not certified, on independent medical review.