

Case Number:	CM13-0063375		
Date Assigned:	12/30/2013	Date of Injury:	12/08/2012
Decision Date:	05/08/2014	UR Denial Date:	11/19/2013
Priority:	Standard	Application Received:	12/10/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Physical Medicine & Rehabilitation, has a subspecialty in Neurological Medicine and is licensed to practice in Maryland. 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 expert 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 45 year old female who was injured on December 8, 2012. Her diagnoses includes chronic neck pain and cervical disc displacement C5-C6 and C6-C7 with myeloradiculopathy, status post ACDF C5-C7 (10/17/13). There is a request for retrospective Mentherm 120ml, 1 tube. There is an 11/11/13 primary treating physician report which states that the pain is better. The patient had back surgery 10/17/13. She has some hoarseness. She has some paresthesias in the left arm. She states that she needs medications. The patient requested refills. A mandatory urine drug screen is done. The physical exam reveals normal reflexes, sensory and power testing to bilateral upper and lower extremities. There was normal gait and minimal cervical tenderness. Cervical spine ROM not tested Lhermitte's and Spurling's sign not tested. Babinski's are downward bilaterally. Incision was well healed. An initial urine toxicology screen is positive for benzodiazepines, opiates, oxycodone, Tricyclic antidepressants, and marijuana. There is a documentation stating that Mentherm, Anaprox DS, Fexmid, Norco and Ultram were prescribed on 9/4/13.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETROSPECTIVE MENTHODERM OINTMENT 120ML, ONE TUBE: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate Topicals; Topical Analgesics Page(s): 105,111-113.

Decision rationale: Methoderm is a topical analgesic used for the temporary relief of minor aches and muscle pains associated with arthritis, simple backache, strains, muscle soreness and stiffness. The active ingredients are Methyl Salicylate 15.00% and Menthol 10.00%. The MTUS states that salicylate topicals are significantly better than placebo in chronic pain. Menthol is an ingredient in Ben Gay which is a topical salicylate. The MTUS states that topical analgesics are largely experimental in use with few randomized controlled trials to determine efficacy or safety. The documentation indicates that the patient has been prescribed Methoderm since at least 9/4/13 which was prior to her neck surgery in October 2013. There was no significant documentation of functional improvement or decrease in pain despite using this. There is no evidence of intolerance to oral medications necessitating the need for this topical analgesic. Furthermore, this medication is recommended for short term temporary relief of pain in the conditions stated above. The patient's diagnoses preoperatively were chronic neck pain and cervical disc herniation which is not included in the recommended uses for Methoderm. The request for Methoderm 120ml, 1 tube is not medically necessary.