

Case Number:	CM13-0071310		
Date Assigned:	01/08/2014	Date of Injury:	08/24/2011
Decision Date:	04/21/2014	UR Denial Date:	12/26/2013
Priority:	Standard	Application Received:	12/27/2013

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 Family 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 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 60 year old male who works as a Correctional Officer for [REDACTED]. He sustained an injury at work on 8/24/2011 due to cumulative trauma. He is requesting an appeal for the following: the use of Protonix; a standing x-ray of the right knee; Tramadol ER; LidoPro Cream; and Terocin patches. There is a summary letter written by [REDACTED] dated 12/13/2013. The letter describes ongoing complaints of pain in both knees and on the right shoulder. The patient has been treated with multiple modalities to include the following: decompression surgery to the right should for impingement syndrome with lysis of adhesions; a TENS unit; hyalgan injections to the knees; Flexeril; Tramadol ER; LidoPro Cream; and Terocin patches. [REDACTED] also indicated his rationale for the standing x-rays. Specifically, that this was "in preparation for rating." [REDACTED] also indicated his rationale for the use of Protonix. Specifically, that the patient carries the diagnosis of GERD.

IMR ISSUES, DECISIONS AND RATIONALES

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

Protonix 20mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Non-Steroidal Anti-Inflammatory Drugs (NSAID)'s. .

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 68.

Decision rationale: The Chronic Pain Medical Treatment Guidelines specify that the use of proton pump inhibitors, such as Protonix, are recommended for a patient who is using a NSAID and is at risk of a gastrointestinal event (Page 68). While the patient meets the criteria of being on an anticoagulant; he is not taking an NSAID. Therefore, there is no medical justification for use of Protonix.

Standing x-ray right knee: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 341-343. Decision based on Non-MTUS Citation (ODG) Official Disability Guidelines, Knee Chapter

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 13 Knee Complaints Page(s): 341-343.

Decision rationale: There is no evidence to support the physician's request for a standing x-ray of the right knee. The California Medical Treatment Utilization Schedule 2009, pages 341-343, provides guidance for the use of this study. Specifically, that "special studies are not needed to evaluate most knee complaints." This patient has a long history of knee pain and there is no documentation in the records to suggest that treatment change would be made based on the findings of a standing x-ray.

Tramadol ER 150mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 93-94,113..

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 78-89,113.

Decision rationale: Tramadol is a centrally acting synthetic opioid analgesic. It is not recommended as a first-line oral analgesic (Page 113). The Chronic Pain Medical Treatment Guidelines are specific in their recommendations for the use of opioids. These guidelines include criteria for "On-Going Management." The criteria for on-going management include the "4 A's for Ongoing Monitoring" e.g. documentation of pain relief, side effects, physical and psychological functioning, and the occurrence of potentially aberrant drug-related behaviors. There is no documentation in the medical records to indicate that there were efforts to meet all of these criteria (Page 78).

Lido Pro cream bottle: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113. Decision based on Non-MTUS Citation (ODG) Official Disability Guidelines, Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

Decision rationale: LidoPro Cream is a topical analgesic. The Chronic Pain Medical Treatment Guidelines state that these medications are "largely experimental in use with few randomized controlled trials to determine efficacy or safety." Further, these agents are "primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed."

Terocin Patches #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113. Decision based on Non-MTUS Citation (ODG) Official Disability Guidelines, Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

Decision rationale: Terocin is a topical analgesic. The Chronic Pain Medical Treatment Guidelines state that these medications are "largely experimental in use with few randomized controlled trials to determine efficacy or safety." Further, these agents are "primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed."The medical records do not indicate that the patient has neuropathic pain.