

Case Number:	CM13-0072278		
Date Assigned:	01/17/2014	Date of Injury:	10/30/2011
Decision Date:	04/26/2014	UR Denial Date:	12/03/2013
Priority:	Standard	Application Received:	12/30/2013

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 Interventional Spine 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 reported a date of injury of 10/30/2011. According to a report dated 10/24/2013 by [REDACTED], the patient presents with low back pain that radiates to both legs. The patient states that his legs "give away." Examination of the lumbar spine reveals painful limited range of motion. There is positive straight leg raise, Braggard's, and Kemp's tests. Physician states patient has "pain with radiculitis." This is the only progress report provided for review, and this is the extent of the physical examination reporting.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 COMPOUND MEDICATION 240gm (CAPASAICIN 0.025%, FLURBIPROFEN 15%, TRAMADOL 15%, MENTHOL 2% AND CAMPHOR 2%): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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

Decision rationale: This patient presents with low back pain that radiates to both legs. Physician is requesting a compound cream that contains capsaicin 0.025%, Flurbiprofen 15%, Tramadol

15%, menthol 12%, and camphor 2%. The MTUS Guidelines has the following regarding topical creams on page 111, "under chronic pain section. For capsaicin, which is a nonsteroidal anti-inflammatory agent, the efficacy in clinical trials for this treatment modality has been inconsistent, and most studies are small and of short duration. Topical NSAIDs had been shown in the meta-analysis to be superior to placebo during the first 2 weeks of treatment for osteoarthritis. Indications for use are osteoarthritis and tendinitis (in particular, that of the knee and elbow) or other joints that are amendable to topical treatment." In this case, the patient does not meet the indication for the topical medication as he does not present with any osteoarthritis or tendonitis symptoms. In addition, Tramadol is not tested for transdermal use with any efficacy. The recommended compound topical cream is not medically necessary and recommendation is for denial.

1 COMPOUND MEDICATION 240gm (FLURBIPROFEN 15% AND TRAMADOL 15%): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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

Decision rationale: This patient presents with low back pain that radiates to both legs. Physician is requesting a compound cream that contains Flurbiprofen 15% and Tramadol 15%. The MTUS Guidelines has the following regarding topical creams on page 111, under chronic pain section. For Flurbiprofen, which is a nonsteroidal anti-inflammatory agent, "the efficacy in clinical trials for this treatment modality has been inconsistent, and most studies are small and of short duration. Topical NSAIDs had been shown in the meta-analysis to be superior to placebo during the first 2 weeks of treatment for osteoarthritis. Indications for use are osteoarthritis and tendinitis (in particular, that of the knee and elbow) or other joints that are amendable to topical treatment." In this case, the patient does not meet the indication for the topical medication as he does not present with any osteoarthritis or tendonitis symptoms. In addition, Tramadol is not tested for transdermal use with any efficacy. The recommended compound topical cream is not medically necessary and recommendation is for denial.