

<b>Case Number:</b>	CM14-0002203		
<b>Date Assigned:</b>	01/24/2014	<b>Date of Injury:</b>	11/29/2000
<b>Decision Date:</b>	06/10/2014	<b>UR Denial Date:</b>	12/11/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/07/2014

### 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 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 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 applicant has filed a claim for chronic shoulder pain and derivative depression reportedly associated with an industrial injury of November 29, 2000. Thus far, the applicant has been treated with the following: analgesic medications; muscles relaxants; topical agents, earlier shoulder surgery; subsequent shoulder manipulation under anesthesia; and proton pump inhibitors. In a utilization review report dated December 11, 2013, the claims administrator approved a request for Naprosyn while denying a request for omeprazole. The claims administrator stated that the applicant did not have any issues with GI complaints despite ongoing Naprosyn usage. The applicant's attorney appealed the denial. A November 20, 2013 progress note was notable for comments that the applicant reported 5/10 pain, reportedly ameliorated with Naprosyn. The applicant reportedly ameliorated with Vicodin. The applicant was somewhat depressed. The review of systems section was notable for complaints of shoulder pain, sleep disturbance, and depression. Naprosyn, Flexeril, and Vicodin were seemingly endorsed. In an earlier note of September 11, 2013, the applicant was described as represented, not working, and receiving Social Security Disability benefits. The applicant was given prescriptions for Vicodin, Flexeril, Naprosyn, Acetadryl, Prilosec, and Terocin. It was stated that the Prilosec was being employed to treat stomach upset obtained from taking medications. This was not elaborated or expounded upon, however. An earlier note of July 31, 2013 was also notable for comments that the applicant was using Prilosec to treat stomach upset from taking medications. The applicant was also reportedly depressed and having sleep disturbance as of that point in time.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**PRILOSEC 20MG #60 DISPENSED ON 7/31/13:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAID, GI SYMPTOMS AND CARDIOVASCULAR RISK Page(s): 68-69.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDS, GI SYMPTOMS AND CARDIOVASCULAR RISK Page(s): 69.

**Decision rationale:** As noted from the MTUS Chronic Pain Medical Treatment Guidelines, proton pump inhibitors such as Prilosec are indicated in the treatment of non-steroidal anti-inflammatory drugs (NSAIDs) induced dyspepsia. In this case, the attending provider has seemingly posited, on several occasions, that the applicant is in fact suffering from medication-induced dyspepsia. While this has not been elaborated upon, several progress notes do make explicit mention of stomach upset associated with medication consumption. Ongoing usage of Prilosec, a proton-pump inhibitor, is indicated to combat the same. Therefore, the request is medically necessary.