

<b>Case Number:</b>	CM14-0006731		
<b>Date Assigned:</b>	02/07/2014	<b>Date of Injury:</b>	05/09/2011
<b>Decision Date:</b>	05/27/2014	<b>UR Denial Date:</b>	01/02/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/17/2014

### 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 Physical Medicine and 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 is a 31-year-old female with a date of injury of 05/09/2011. The listed diagnoses per [REDACTED] are posttraumatic stress syndrome, and no acute medical problems traumatic work-related incident.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**QUAZEPAM 15MG #60 FOR SLEEP:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES, PAIN PROCEDURE SUMMARY.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Benzodiazepines Page(s): 24.

**Decision rationale:** According to report dated 01/23/2014, the patient presents for psychopharmacological follow-up. Patient states her mood is still down, but she is sleeping through the night. She is taking Mirtazapine 15 mg and Doral 15 mg. She continues to have intrusive thoughts and nightmares about the traumatic work incident. The treating physician is prescribing Quazepam 15 mg to replace the Zolpidem the patient is currently taking. The MTUS

Chronic Pain Medical Treatment Guidelines page 24 states, "Benzodiazepines are not recommended for long-term use because long-term efficacies are unproven and there is a risk of dependence." Although, a short course of Quazepam may be indicated for this patient's sleep issues. The treating physician is requesting #60. Benzodiazepines run the risk of dependence and difficulty of weaning per MTUS guidelines. It is not recommended for long-term use. The request for Quazepam 15 mg # 60 for sleep is not medically necessary and appropriate.