

Case Number:	CM14-0006761		
Date Assigned:	02/07/2014	Date of Injury:	09/07/2004
Decision Date:	06/25/2014	UR Denial Date:	12/24/2013
Priority:	Standard	Application Received:	01/15/2014

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 Internal Medicine and is licensed to practice in Arizona. 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 injured worker is a 52year old man with a work related injury dated 9/7/04 with resulting chronic low back pain. His primary provider on 12/10/13 saw the injured worker. At that visit the injured worker complained of back pain with a burning sensation more on the right leg than the left. He rates his pain as an 8 to 9/10 and has difficulty with standing, bending or stooping. The physical exam showed normal blood pressure with a benign abdominal exam, cardiovascular exam and respiratory exam. There is decreased range of motion in the lumbar spine positive bilateral SLR and DTR are decreased bilaterally in the legs. He takes medications including Norco 10/325 (up to 4 tabs daily), Ultram ER 200mg at sleep, Cymbalta, Colace, Senokot, Amitiza and Valium 10mg daily for back spasm. The injured worker requests laboratory testing for his liver and kidney function. No specific symptoms of concern for liver or kidney disease were documented. The diagnoses include status post lumbar laminectomy at L4-L5, reactive depression, constipation from narcotic use and intermittent back spasms. The plan of care included continuation of the medications and to check labs including a CBC, CMP, UA and a sed rate to evaluate his liver and renal function.

IMR ISSUES, DECISIONS AND RATIONALES

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

PRESCRIPTION OF VALIUM 10MG, #12: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, ,

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

Decision rationale: Valium is a benzodiazepine medication. Benzodiazepines are not recommended for long-term use because long-term efficacy is unproven and there is a risk of dependence. Most guidelines limit use to 4 weeks. Their range of action includes sedative/hypnotic, anxiolytic, anticonvulsant, and muscle relaxant. Tolerance to benzodiazepines occurs rapidly. The chronic use of benzodiazepines is the treatment of choice in very few conditions. In this case the injured worker has been treated for more than 4 weeks. The continued use of Valium is not medically necessary.

LAB: CBC DIFFERENTIAL: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, ,

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 70. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: UptoDate.com Acetomenophen, Tramadol, Cymbalta drug information

Decision rationale: According to the MTUS a patient taking NSAID analgesic medications should have period laboratory studies including a CBC and CMP. In this case there is no documentation that the patient is taking any NSAID medications. According to UpToDate drug information, drug monitoring of Tramadol and Cymbalta include blood pressure and pulse monitoring. The use of Cymbalta requires glucose and A1C monitoring in patients with diabetes and also BUN, creatinine and transaminases in non-diabetic patients. There is no indication for monitoring of a CBC with differential. The request is not medically necessary or appropriate.

LAB: COMPREHENSIVE METABOLIC PANEL: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation MTUS: CHRONIC PAIN MEDICAL TREATMENT GUIDELINES, ,

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 70. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: UptoDate.com Acetomenophen, Tramadol, Cymbalta drug information

Decision rationale: According to the MTUS a patient taking NSAID analgesic medications should have period laboratory studies including a CBC and CMP. In this case there is no documentation that the patient is taking any NSAID medications. According to UpToDate drug

information, drug monitoring of Tramadol and Cymbalta include blood pressure and pulse monitoring. The use of Cymbalta requires glucose and A1C monitoring in patients with diabetes and also BUN, creatinine and transaminases in non-diabetic patients. In this case the patient continues to take Cymbalta. According to UpToDate monitoring of BUN, creatinine and transaminases are appropriate. The request is medically necessary.

LAB: URINALYSIS: 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 Page(s): 70. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: UptoDate.com Acetomenophen, Tramadol, Cymbalta drug information

Decision rationale: According to the MTUS a patient taking NSAID analgesic medications should have period laboratory studies including a CBC and CMP. In this case there is no documentation that the patient is taking any NSAID medications. According to UpToDate drug information, drug monitoring of Tramadol and Cymbalta include blood pressure and pulse monitoring. The use of Cymbalta requires glucose and A1C monitoring in patients with diabetes and also BUN, creatinine and transaminases in non-diabetic patients. There is no indication for monitoring of a UA. The request is not medically necessary.

LAB: SEDIMENTATION RATE TO EVALUATE THE LIVER AND RENAL FUNCTION: 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 Page(s): 70. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: UptoDate.com Acetomenophen, Tramadol, Cymbalta drug information

Decision rationale: According to the MTUS a patient taking NSAID analgesic medications should have period laboratory studies including a CBC and CMP. In this case there is no documentation that the patient is taking any NSAID medications. According to UpToDate drug information, drug monitoring of Tramadol and Cymbalta include blood pressure and pulse monitoring. The use of Cymbalta requires glucose and A1C monitoring in patients with diabetes and also BUN, creatinine and transaminases in non-diabetic patients. There is no indication for monitoring of a sedimentation rate. The request is not medically necessary.