

Case Number:	CM14-0007987		
Date Assigned:	02/07/2014	Date of Injury:	07/16/2012
Decision Date:	06/23/2014	UR Denial Date:	01/10/2014
Priority:	Standard	Application Received:	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 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 patient is a 21-year-old male who has submitted a claim for low back pain, left knee pain, and bilateral ankle pain, associated with an industrial injury date of July 16, 2012. Medical records from 2012 through 2014 were reviewed. The latest progress report, dated February 20, 2014, showed that the patient complained of persistent pain and swelling in the left ankle, low back pain, left knee pain, and right ankle pain with radiation to the right leg. The pain was associated with tingling, numbness and weakness on both legs and feet. The pain was described as sharp, pressure like, and burning with pins and needles sensation. The pain was aggravated by prolonged standing and walking. Physical examination revealed full range of motion for the lumbar spine and left ankle but swelling was noted on the left ankle. Motor examination revealed significant weakness on the left ankle plantarflexors and dorsiflexors. There were diminished sensations in the left L3, L4, L5 dermatomes of the lower extremities. The MRI of the left ankle, dated 08/17/2012, showed a complete versus near complete anterior talo-fibular ligament rupture. Treatment to date has included physical therapy, medications, and nerve blocks. Utilization review from January 8, 2014 denied the request for the purchase of Dendracin (Methyl Salicylate/Benzocaine/Menthol) lotion twice-a-day (BID) because the current guidelines do not recommend its use.

IMR ISSUES, DECISIONS AND RATIONALES

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

DENDRACIN LOTION: 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, TOPICAL ANALGESICS, 111-113

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines TOPICAL ANALGESICS Page(s): 112-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Section, Methyl Salicylate, Menthol

Decision rationale: Dendracin lotion contains methyl salicylate, benzocaine, and menthol. According to the Chronic Pain Guidelines, there is little to no research to support the use of local anesthetics in topical compound formulations. The Benzocaine component does not show consistent effectiveness to be used on topical application. Regarding the Menthol and Methyl Salicylate components, the guidelines do not cite specific provisions, but the Official Disability Guidelines issued a Food and Drug Administration (FDA) safety warning which identifies rare cases of serious burns that have been reported to occur on the skin where over-the-counter (OTC) topical muscle and joint pain relievers were applied. These products contain the active ingredients menthol, methyl salicylate, or capsaicin. In this case, the rationale of using a topical lotion is to reduce impact on the patient's gastrointestinal system brought by the use of Naproxen, which the patient has continually taken since 2013. However, guidelines state that any compounded product that contains a drug class that is not recommended is not recommended. Dendracin lotion contains drug components that are not recommended for topical use. Therefore, the request for Dendracin lotion is not medically necessary.