

Case Number:	CM14-0101017		
Date Assigned:	07/30/2014	Date of Injury:	02/18/2012
Decision Date:	09/15/2014	UR Denial Date:	06/02/2014
Priority:	Standard	Application Received:	06/30/2014

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 request for independent medical interview was signed on June 20, 2014. Per the records provided, the patient was described as a 27-year-old man who was injured when a coworker ran over him with a skid steer on February 18, 2012 and the left foot was caught in the skid steer. He has lumbar radiculitis, spondylosis, degenerative disc disease, and facet syndrome. A retrospective request was made for a urine drug screen, one Toradol injection 60 mg and 12 of Methoderm gel. They did x-rays of the left foot and the patient was provided with crutches, a boot and medicine. He began to develop additional pain in the low back, right shoulder and the right lower extremity when he returned to work. He has attended physical and chiropractic therapy and has used a TENS unit. He reports he received 10 steroid injections to the lower back. He underwent left L4-L5 and L5-S1 transforaminal epidural steroid injections on December 13, 2012, April 3, 2013 and September 12, 2013 and he also had two sessions of bilateral lumbar facet injections. Electrodiagnostic studies on January 25, 2013 raised the possibility of chronic but not active left L5 radiculopathy. He had degenerative changes on the lumbar MRI. Medication includes; Lortab, Norflex, Norco, Soma, Metaxalone, Lidoderm patches, Cymbalta, Lyrica and Gabapentin. He continued with severe low back pain radiating across the buttocks and groin but he denied radiation into the lower extremities.

IMR ISSUES, DECISIONS AND RATIONALES

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

Methoderm gel 240ml: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints,Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 105.

Decision rationale: Menthoderm is a combination of methyl salicylate and menthol. The MTUS notes that topical salicylate (e.g., Ben-Gay, methyl salicylate) is significantly better than placebo in chronic pain. This product is used to treat minor aches and pains of the muscles/joints (e.g., arthritis, backache, sprains). Menthol and methyl salicylate are known as counterirritants. They work by causing the skin to feel cool and then warm. In this case, these agents are readily available over the counter, Prescription analogues would not be necessary. Therefore, this request is not medically necessary.

Toradol injection 60mg: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 12 Low Back Complaints,Chronic Pain Treatment Guidelines.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence, Physician Desk Reference, Toradol injections.

Decision rationale: Toradol, or Ketorolac, can be injected IM, and may be used as an alternative to opioid therapy. However, there is no indication that Toradol was actually injected in the 3-12-14 record; it was a B vitamin. Due to the medical necessity to track IM medicines, there is insufficient information to say the medicine was used, and so that it could be certified. Therefore, this request is not medically necessary.