

<b>Case Number:</b>	CM14-0108922		
<b>Date Assigned:</b>	08/01/2014	<b>Date of Injury:</b>	06/21/2013
<b>Decision Date:</b>	12/26/2014	<b>UR Denial Date:</b>	07/01/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/14/2014

### 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 Preventive Medicine, has a subspecialty in Occupational Medicine and is licensed to practice in Iowa. 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:

This is a 46 year old patient with date of injury of 06/21/2013. Medical records indicate the patient is undergoing treatment for lumbar disc herniations at L4-5 and L5-S1, facet arthropathy of lumbar spine, right hip trochanteric bursitis and right S1 joint dysfunction. Subjective complaints include back pain that radiates to right leg and foot with numbness and weakness. Objective findings include tenderness on the lower lumbar facet regions, the right side greater than left; decreased range of motion and sensation at L4, L5 and S1 dermatomes on the right and mildly antalgic gait. Treatment has consisted of chiropractic therapy, acupuncture, medial branch block bilateral L5-S1 on 08/15/2014, laboratory studies, Norco, Naproxen, LidoPro cream, Gabapentin, Tylenol and Advil. MRI of the lumbar spine dated 08/02/2013 revealed straightening of the normal lumbar lordosis, which per documentation may have been due to muscle spasm or patient positioning, mild lumbar spondylosis at L4-5 and L5-S1 without evidence for spinal canal or neural foraminal stenosis. On 09/09/2013 a nerve conduction study and electromyography reveal normal findings. The utilization review determination was rendered on 07/01/2014 recommending denial of LidoPro topical ointment 4 oz.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**LidoPro topical ointment 4 oz times 1:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Compound creams

**Decision rationale:** LidoPro is a topical medication containing Lidocaine, Capsaicin, Menthol, and Methyl Salicylate. ODG recommends usage of topical analgesics as an option, but also further details "primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed." The medical documents do not indicate failure of antidepressants or anticonvulsants. MTUS states, "There is little to no research to support the use of many of these agents. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." MTUS recommends topical capsaicin "only as an option in patients who have not responded or are intolerant to other treatments." There is no indication that the patient has failed oral medication or is intolerant to other treatments. Additionally, ODG states "Topical OTC pain relievers that contain menthol, methyl salicylate, or capsaicin, may in rare instances cause serious burns, a new alert from the FDA warns." ODG only comments on menthol in the context of cryotherapy for acute pain, but does state "Topical OTC pain relievers that contain menthol, methyl salicylate, or capsaicin, may in rare instances cause serious burns, a new alert from the FDA warns." MTUS states regarding topical Salicylate, "Recommended. Topical salicylate (e.g., Ben-Gay, methyl salicylate) is significantly better than placebo in chronic pain. (Mason-BMJ, 2004) See also topical analgesics; & Topical analgesics, compounded." In this case, lidocaine is not supported for topical use per guidelines. As such, the request for LidoPro topical ointment 4 oz. times 1 is not medically necessary.