

Case Number:	CM14-0017352		
Date Assigned:	04/14/2014	Date of Injury:	04/04/1996
Decision Date:	07/18/2014	UR Denial Date:	01/22/2014
Priority:	Standard	Application Received:	02/11/2014

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 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:

This is a 61 year-old male who was injured on 4/4/1996. He has been diagnosed with brachial neuritis, cervical spondylosis, RSD (reflex sympathetic disorder), post laminectomy syndrome; thoracic/lumbar pain. On 1/22/14, the UR provided a retrospective denial for compounded topical medications. On the 1/30/14 pain management report from [REDACTED], the patient was reported to present with left arm and leg pain.

IMR ISSUES, DECISIONS AND RATIONALES

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

RETRO: KETOPROFEN 15GM, CYCLOBENZAPRINE 9GM, LIDOCAINE HCL 5 7.5GM, VERSAPRO BASE 130GM, DOS: 8-2-12: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: The patient presents with left arm and leg pain. He has been diagnosed with postlaminectomy syndrome and RSD (reflex sympathetic disorder). I have been asked to review for a compounded topical medication containing ketoprofen, cyclobenzaprine, lidocaine. On page 111, under topical analgesics, MTUS gives a general statement about compounded

products: "Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." MTUS specifically states Ketoprofen is not FDA approved for topical applications. Therefore any compounded product that contains Ketoprofen is not recommended.

RETRO: FLUBIPROFEN 22.5GM, CAPSACIN 0.0375GM, VERSAPRO BASE 127.7 GM, DOS:8-27-12: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: The patient presents with left arm and leg pain. He has been diagnosed with postlaminectomy syndrome and RSD. I have been asked to review for a compounded topical medication containing flurbiprofen, and capsaicin 0.0375%. On page 111, under topical analgesics, MTUS gives a general statement about compounded products: "Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." The compound also contains Capsaicin 0.0375%, and MTUS for capsaicin states "There have been no studies of a 0.0375% formulation of capsaicin and there is no current indication that this increase over a 0.025% formulation would provide any further efficacy." MTUS does not appear to support the use of 0.0375% Capsaicin, therefore the whole compounded topical is not supported. The request is not in accordance with MTUS guidelines

RETRO: FLUBIPROFEN 22.5GM, CAPSACIN 0.0375GM, VERSAPRO BASE 127.7 GM, DOS:12-26-12: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: The patient presents with left arm and leg pain. He has been diagnosed with postlaminectomy syndrome and RSD. I have been asked to review for a compounded topical medication containing flurbiprofen, and capsaicin 0.0375%. On page 111, under topical analgesics, MTUS gives a general statement about compounded products: "Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." The compound also contains Capsaicin 0.0375%, and MTUS for capsaicin states "There have been no studies of a 0.0375% formulation of capsaicin and there is no current indication that this increase over a 0.025% formulation would provide any further efficacy." MTUS does not appear to support the use of 0.0375% Capsaicin, therefore the whole compounded topical is not supported. The request is not in accordance with MTUS guidelines

RETRO: KETOPROFEN 15GM, CYCLOBENZAPRINE 9GM, LIDOCAINE HCL 5 7.5GM, VERSAPRO BASE 130GM; DOS: 8-01-2013: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: The patient presents with left arm and leg pain. He has been diagnosed with postlaminectomy syndrome and RSD. I have been asked to review for a compounded topical medication containing ketoprofen, cyclobenzaprine, lidocaine. On page 111, under topical analgesics, MTUS gives a general statement about compounded products: "Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." MTUS specifically states Ketoprofen is not FDA approved for topical applications. Therefore any compounded product that contains Ketoprofen is not recommended.