

Case Number:	CM14-0117131		
Date Assigned:	08/04/2014	Date of Injury:	06/08/2000
Decision Date:	10/24/2014	UR Denial Date:	07/08/2014
Priority:	Standard	Application Received:	07/24/2014

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 claimant was injured on 06/08/2000. Tramadol is under review. A lumbar epidural steroid injection was recommended in early 2013 and the claimant was using Tramadol at that time, 4 per day for pain. A refill was requested. On 04/11/13, he reported pain relief from the lumbar epidural steroid injection. He was using Tramadol 1 or 2 per day. He was given a refill. On 05/15/14, he had minimal neck pain with probable weakness in the upper extremities. He had ongoing low back pain radiating down to his feet. He received a refill of Tramadol and also was given Flexeril.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 150mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 77.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Tramadol, Page(s): 145.

Decision rationale: The history and documentation do not objectively support the request for Tramadol 150 mg #60. The MTUS state "Tramadol (Ultram) is a centrally acting synthetic opioid analgesic and it is not recommended as a first-line oral analgesic." Page 114 further states

"opioid analgesics and Tramadol have been suggested as a second-line treatment (alone or in combination with first-line drugs). A recent consensus guideline stated that opioids could be considered first-line therapy for the following circumstances: (1) prompt pain relief while titrating a first-line drug; (2) treatment of episodic exacerbations of severe pain; [&] (3) treatment of neuropathic cancer pain. Response of neuropathic pain to drugs may differ according to the etiology of therapeutic pain. There is limited assessment of effectiveness of opioids for neuropathic pain, with short-term studies showing contradictory results and intermediate studies (8-70 days) demonstrating efficacy." In this case, there is no documentation of trials and failure of or intolerance to other more commonly used first line drugs and no evidence that this medication was prescribed while a first line drug was being titrated to pain relief. The anticipated benefit or indications for the continued use of this medication have not been stated. There is no documentation of an ongoing exercise program to help the claimant maintain any benefit he receives from treatment measures. The medical necessity of Tramadol 150 mg has not been clearly demonstrated. Of note, the claimant's course of care since the ESI in early 2013, including other treatment measures such as local modalities, first line medications, and exercise and his current status regarding his use of medications for chronic pain are unknown. Therefore the request is not medically necessary. In this case, there is no documentation of trials and failure of or intolerance to other more commonly used first line drugs and no evidence that this medication was prescribed while a first line drug was being titrated to pain relief. The anticipated benefit or indications for the continued use of this medication have not been stated. There is no documentation of an ongoing exercise program to help the claimant maintain any benefit he receives from treatment measures. The medical necessity of tramadol 150 mg has not been clearly demonstrated. Of note, the claimant's course of care since the ESI in early 2013, including other treatment measures such as local modalities, first line medications, and exercise and his current status regarding his use of medications for chronic pain are unknown.