

<b>Case Number:</b>	CM14-0126180		
<b>Date Assigned:</b>	09/24/2014	<b>Date of Injury:</b>	10/21/2010
<b>Decision Date:</b>	10/30/2014	<b>UR Denial Date:</b>	07/25/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/08/2014

### 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 applicant is a represented [REDACTED] employee who has filed a claim for chronic wrist pain, elbow pain, shoulder pain, neck pain, and low back pain reportedly associated with an industrial injury of October 21, 2010. Thus far, the applicant has been treated with the following: Analgesic medications; earlier shoulder surgery; earlier wrist and elbow surgery; unspecified amounts of physical therapy; and topical compounded medications. In a Utilization Review Report dated September 11, 2014, the claims administrator denied several topical compounded drugs. The applicant's attorney subsequently appealed. Several of the topical compounds at issue were sought via prescriptions forms of September 15, 2014 and March 18, 2014. No clinical progress notes or applicant-specific rationale was attached to the same. On August 20, 2014, the applicant received prescriptions for a variety of oral agents, including Nalfon, Flexeril, Zofran, and tramadol. In an office visit of August 12, 2014, the applicant reported persistent complaints of elbow pain of 5/10. The applicant was placed off of work, on total temporary disability, while unspecified amounts of physical therapy were endorsed.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Flurbiprofen/Capsaicin (Patch) 10%/0.025% 120gm with 1 refill:** 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 Capsaicin topic Page(s): 28.

**Decision rationale:** As noted on page 28 of the MTUS Chronic Pain Medical Treatment Guidelines, capsaicin is one of the ingredients in the compound and it is considered a last line agent to be employed only in those applicants who have failed to respond to and/or is intolerant to other treatments. In this case, however, the applicant's ongoing usage of several first-line oral pharmaceuticals, including tramadol, cyclobenzaprine, etc., effectively obviates the need for the capsaicin-containing topical compound. Therefore, the request is not medically necessary.

**Lidocaine/Hyaluronic (Patch) 6%/0.2% 120gm with 1 refill:** 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): page 111,.

**Decision rationale:** As noted on page 111 of the MTUS Chronic Pain Medical Treatment Guidelines, topical analgesics, as a class, are "largely experimental". In this case, the applicant's ongoing usage of numerous first-line oral pharmaceuticals, including tramadol, Flexeril, etc., effectively obviates the need for the largely experimental topical patch at issue. Therefore, the request is not medically necessary.