

Case Number:	CM14-0150896		
Date Assigned:	09/19/2014	Date of Injury:	08/09/2012
Decision Date:	10/17/2014	UR Denial Date:	08/20/2014
Priority:	Standard	Application Received:	09/16/2014

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 Emergency 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 injured worker is a 54 year-old male, who sustained an injury on August 9, 2012. The mechanism of injury occurred while moving a heavy table. Diagnostics have included: July 21, 2014 EMG/NCV reported as showing acute left L5 radiculopathy. Treatments have included: medications. The current diagnoses are: cervical strain, rule out cervical disc displacement, lumbar strain, rule out lumbar disc displacement, cervical radiculopathy. The stated purpose of the request for Tabradol 1mg/ml oral suspension 250ml 2tsp 2-3 x a day (cyclobenzaprine):, was for muscle spasms and joint health. The request for Tabradol 1mg/ml oral suspension 250ml 2tsp 2-3 x a day (cyclobenzaprine):, was denied on August 20, 2014, citing a lack of documentation of evidence based support for the additional compounded ingredients and that muscle relaxants are not to be used long-term. Per the reports dated July 18-21, 2014, the treating physician noted complaints of pain to the neck and low back. Exam findings included cervical muscle tenderness with decrease cervical range of motion, lumbar paraspinal muscle tenderness with decreased lumbar range of motion, positive straight leg raising test.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tabradol 1mg/ml oral suspension 250ml 2tsp 2-3 x a day (cyclobenzaprine): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants Page(s): 41-42.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxants Page(s): 63-66. Decision based on Non-MTUS Citation ODG, Work Loss Data Institute (www.worklossdata.com), (updated 7/10/14): Pain (chronic), Medications - compounded

Decision rationale: The requested Tabradol 1mg/ml oral suspension 250ml 2tsp 2-3 x a day (cyclobenzaprine):, is not medically necessary. CA MTUS Chronic Pain Treatment Guidelines, Muscle Relaxants, Page 63-66, do not recommend muscle relaxants as more efficacious than NSAID s and do not recommend use of muscle relaxants beyond the acute phase of treatment. Work Loss Data Institute (www.worklossdata.com), (updated 7/10/14): Pain (chronic), Medications - compounded, do not recommend compounded medications as there is no clear evidence "about whether compounding medications are more efficacious than the single medication." The injured worker has pain to the neck and low back. The treating physician has documented cervical muscle tenderness with decrease cervical range of motion, lumbar paraspinal muscle tenderness with decreased lumbar range of motion, positive straight leg raising test. This medication was prescribed from at least March 2014. The treating physician has not documented intolerance to NSAID treatment, nor objective evidence of derived functional improvement from its previous use. The treating physician has not documented the medical necessity for compounded medications over single medications, nor failed trials of the constituent ingredient single medications. The criteria noted above not having been met, Tabradol 1mg/ml oral suspension 250ml 2tsp 2-3 x a day (cyclobenzaprine): is not medically necessary.