

Case Number:	CM14-0154266		
Date Assigned:	09/24/2014	Date of Injury:	08/29/2012
Decision Date:	10/30/2014	UR Denial Date:	09/12/2014
Priority:	Standard	Application Received:	09/22/2014

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 shoulder pain reportedly associated with an industrial injury of August 29, 2012. In a Utilization Review Report dated September 12, 2014, the claims administrator retrospectively approved a request for Norco and Tramadol, partially certified a request for Prilosec, and denied a request for Reglan. The applicant's attorney subsequently appealed. In a September 23, 2014 medical-legal evaluation, the applicant presented with primary complaint of migraine headaches, which had reportedly been ameliorated with ongoing usage of Elavil, Ultram, and Norco, the applicant stated. The medical-legal evaluator stated that the applicant was working. The medical-legal evaluator stated that previous usage of Imitrex had proven unsuccessful to combat issues with headaches. In an August 1, 2014 progress note, the applicant reported persistent complaints of migraine headaches. The applicant stated that "his migraine headaches were well controlled with amitriptyline and that he used Reglan for nausea associated with migraine headaches." The applicant was also using Norco and Motrin for pain-associated migraine headaches. The applicant was asked to continue regular duty work. It was stated that the applicant was using Reglan as often as once a day for nausea, Ultram up to thrice daily on a p.r.n. basis, Norco thrice daily, Motrin on a p.r.n. basis, and Prilosec on a p.r.n. basis. In a separate note dated August 1, 2014, the applicant presented with ongoing complaints of shoulder pain. The applicant was given a shoulder corticosteroid injection. Norco, Motrin, Prilosec, Reglan, and Ultram were renewed. It was stated that the applicant already had enough Elavil available through the pharmacy. On June 6, 2014, it was again stated that the applicant was using Reglan on an as-needed basis for nausea. The applicant was also given refills of Ultram and Elavil. It was stated that the applicant was "doing well on the current medications." The applicant was returned to

regular duty work. There was no mention of issues associated with reflux, heartburn, and/or dyspepsia on this or other notes.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prilosec 20mg #60: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, GI Symptoms, and Cardiovascular Risk topic Page(s): 69, 7.

Decision rationale: While page 69 of the MTUS Chronic Pain Medical Treatment Guidelines does support provision of proton pump inhibitors such as Prilosec to combat issues with NSAID-induced dyspepsia, in this case, however, the information on file does not suggest the presence of any issues with reflux, heartburn, and/or dyspepsia, either NSAID-induced, or stand-alone. It is further noted that page 7 of the MTUS Chronic Pain Medical Treatment Guidelines stipulates that an attending provider incorporate some discussion of medical efficacy into his choice of recommendations. In this case, the attending provider has simply renewed Prilosec from visit to visit, with no explicit discussion of whether or not Prilosec has been effectual and/or for what purpose it is being employed here. Therefore, the request for Prilosec 20mg #60 is not medically necessary.

Reglan 10mg #60: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation The National Center for Biotechnology Information

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 7-8.. Decision based on Non-MTUS Citation <http://www.aafp.org/afp/2005/0501/p1770.html> (American Academy of Family Physicians, May 2005, Metoclopramide for Pain and Nausea in Patients with Migraine.)

Decision rationale: While the MTUS does not specifically address the topic of Reglan, pages 7 and 8 of the MTUS Chronic Pain Medical Treatment Guidelines do stipulate that an attending provider using a drug for non-FDA labeled purposes has a responsibility to be well informed regarding usage of the same and should, furthermore, furnish compelling evidence to support such usage. The American Academy of Family Physicians (AAFP)'s systemic review of May 2005 does acknowledge that Reglan is effective when used alone and seems to add relief when used with other migraine treatments. AAFP suggests considering Reglan in applicants with acute migraines. In this case, the attending provider has posited that previous usage of Reglan has proven effectual in combating nausea associated with acute migraines. The attending provider has also stated that other medications employed for migraines, including Imitrex,

conversely, have proven unsuccessful. Continuing Reglan does appear to be indicated, given the applicant's reported favorable response to prior usage of the same and favorable AAFP position on usage of Reglan for nausea-associated migraine headaches. Therefore, the request for Reglan 10mg #60 is medically necessary.