

<b>Case Number:</b>	CM14-0154987		
<b>Date Assigned:</b>	09/25/2014	<b>Date of Injury:</b>	02/24/2009
<b>Decision Date:</b>	11/10/2014	<b>UR Denial Date:</b>	08/25/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 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 39 year-old patient sustained an injury on 2/24/09 while employed by [REDACTED]. The request under consideration includes Xolido 118ml cream. The diagnoses included cervical spine sprain/strain with radiculopathy; thoracic spine sprain/strain; lumbar spine sprain/strain with radiculopathy. Conservative care has included medications, therapy, acupuncture, chiropractic treatment, and modified activities/rest. Report dated 6/5/14 from the provider noted the patient with chronic ongoing neck pain radiating to head, upper extremities rated 2/10, mid back pain at 4/10, and low back pain radiating to mid back, buttocks and bilateral feet rated at 4/10. There are past medical history of hypertension and thyroid condition. Exam showed tenderness and hypertonicity of cervical paravertebral muscles and upper trapezius; 5/5 motor strength in upper and lower extremities; DTRs 2+ with diminished sensation of C6 nerve distribution; lumbar and thoracic spine with tenderness and limited range with decreased sensation at L4 nerve root with positive SLR on right. There was previous peer review non-certification of Terocin patch containing Lidocaine and Menthol on 8/22/14. The request for Xolido 118ml cream was non-certified on 8/25/14 citing guidelines criteria and lack of medical necessity.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Xolido 118ml cream:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Medications Page(s): 111-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain, Lidoderm (Lidocaine), page 751

**Decision rationale:** The request for Xolido 118ml cream was non-certified on 8/25/14. Chronic symptoms and clinical findings remain unchanged with the medication refilled. The patient exhibits diffuse tenderness and pain on the exam to the spine and extremities with radiating symptoms. The chance of any type of topical improving generalized symptoms and functionality significantly with such diffuse pain is very unlikely. According to the guidelines, Topical Xolido (Lidocaine) is indicated for post-herpetic neuralgia, according to the manufacturer. There is no evidence in any of the medical records that this patient has a neuropathic source for the diffuse pain. Without documentation of clear localized, peripheral pain to support treatment with Lidocaine along with functional benefit from treatment already rendered, medical necessity has not been established. There is no documentation of intolerance to oral medication as the patient is also on other oral analgesics. Xolido 118ml cream is not medically necessary and appropriate.