

Case Number:	CM14-0155337		
Date Assigned:	09/25/2014	Date of Injury:	06/21/2011
Decision Date:	10/30/2014	UR Denial Date:	09/02/2014
Priority:	Standard	Application Received:	09/23/2014

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 Texas. 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 50 year old male with a date of injury on 6/21/2011. The injured worker had a lumbar injury and subsequent lumbar fusion. There is a 9/14 note indicating the injured worker has ongoing back pain with tenderness, along with decrease in lumbar spine range of motion. Notes indicate that the injured worker is waiting for another surgical intervention. A request is made for Flexeril.

IMR ISSUES, DECISIONS AND RATIONALES

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

Flexeril 10mg #60: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Muscle relaxants (for pain) Page(s): 63.

Decision rationale: There is regular request for Flexeril from the provider over several months. Notes, however, fail to indicate the presence of any muscle spasms or other muscle pathology. Flexeril is intended for short term use at the acute phase of an injury or during a flare up and this is clearly not seen at this time. There is no indication that via the use of this drug there has been

improvement in condition or that there has been reduction in pain. Therefore, by the clinical guidelines and the clinical data, the request is not seen to be medically necessary.