

Case Number:	CM14-0157306		
Date Assigned:	09/30/2014	Date of Injury:	10/23/2013
Decision Date:	10/31/2014	UR Denial Date:	09/04/2014
Priority:	Standard	Application Received:	09/25/2014

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 & Rehabilitation, has a subspecialty in California 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 patient is a 58 year old female with a date of injury of 10/23/13. The patient is status post 22 weeks out from left knee arthroscopy with partial medical and lateral meniscectomy. The patient continues to have pain with tenderness over the medial area and medial joint line. Range of motion is 0 to 125 degrees. Quadriceps strength is 5-/5. It was noted that the patient is utilizing a topical cream "which seems to be helping." The request is for a "FCL lido power, Cyclobenzaprine power, PCCA lipo cream compound 180gm." Utilization review denied the request on 9/4/14. Treatment reports from 3/25/14 through 9/2/14 were reviewed.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prescription for FCL Lido powder; Flurb powder; Cyclobenzaprine powder; PCCA Lipo cream compound 180gm: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111.

Decision rationale: This patient is status post 22 weeks out from left knee arthroscopy with partial medical and lateral meniscectomy. The request is for a "Lidocaine powder, Flurbiprofen

power, Cyclobenzaprine power, PCCA Lipo cream compound 180gm." The MTUS Guidelines p 111 has the following regarding topical creams, "topical analgesics are largely experimental and used with few randomized control trials to determine efficacy or safety." MTUS further states, "Any compounded product that contains at least one (or drug class) that is not recommended is not recommended." Per MTUS, Lidocaine is only allowed in a patch form and not allowed in cream, lotion or gel forms and Cyclobenzaprine is a muscle relaxant and not recommended in any topical form. Given such, the entire compound product is not supported and recommendation is for denial.