

Case Number:	CM14-0169439		
Date Assigned:	10/17/2014	Date of Injury:	05/21/2007
Decision Date:	11/19/2014	UR Denial Date:	09/24/2014
Priority:	Standard	Application Received:	10/14/2014

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 Interventional Spine, 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 patient is a 65-year-old female with an injury date of 05/21/07. based on the go 08/13/14 progress report provided by [REDACTED], the patient complains of back, left shoulder, bilateral wrist and hand pain. Physical examination to the bilateral shoulders and wrists revealed no tenderness to palpation. Positive impingement sign to bilateral shoulders. Range of motion for shoulders and wrists were normal. Tinel's was positive bilaterally and Finkelstein's was negative bilaterally. Norflex was prescribed on 08/13/14 and 09/10/14. Her other medications include Naproxen Sodium and Omeprazole. Patient is retired. Diagnosis 08/13/14- shoulder impingement- carpal tunnel syndrome [REDACTED] is requesting Norflex 500mg #60. The utilization review determination being challenged is dated 09/24/14. The rationale is " no indication for Norflex. No significant muscle pathology..." [REDACTED] is the requesting provider and he provided frequent reports from 07/16/14 - 09/10/14.

IMR ISSUES, DECISIONS AND RATIONALES

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

Norflex 500mg #60: Upheld

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

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic) chapter, Muscle relaxants (for pain)

Decision rationale: The patient presents with back, left shoulder, bilateral wrist and hand pain. The request is for Norflex 500mg #60. Her diagnosis dated 08/13/14 includes shoulder impingement and carpal tunnel syndrome. ODG-twc guidelines have the following regarding muscle relaxants for chronic pain: Pain (Chronic) chapter, Muscle relaxants (for pain): "Orphenadrine (Norflex, Banflex, Antiflex, Mio-Rel, Orphenate, generic available): This drug is similar to diphenhydramine, but has greater anticholinergic effects. The mode of action is not clearly understood. Effects are thought to be secondary to analgesic and anticholinergic properties. This drug was approved by the FDA in 1959. Side Effects: Anticholinergic effects (drowsiness, urinary retention, dry mouth). Side effects may limit use in the elderly. This medication has been reported in case studies to be abused for euphoria and to have mood elevating effects." Norflex was prescribed on 08/13/14, however treater has not documented reason for request, nor significant findings on physical examination. Norflex has been prescribed for more than one month from utilization review date of 09/24/14 and functional improvement has not been documented in progress report dated 09/10/14. Furthermore, the patient is 65 years old and the side effect profile of orphenadrine limits its use among the elderly. The request is not inline with ODG. The request therefore is not medically necessary.