

<b>Case Number:</b>	CM14-0169574		
<b>Date Assigned:</b>	10/17/2014	<b>Date of Injury:</b>	03/03/2014
<b>Decision Date:</b>	11/19/2014	<b>UR Denial Date:</b>	09/11/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 Family 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:

51 year old male claimant sustained a work injury on 3/3/14 involving the lumbar spine. He was diagnosed with lumbar strain. A progress note on 9/2/14 indicted the claimant had 3/10 back pain. Exam findings were notable for a positive straight leg raise on the right, a positive Yeoman's signs and spasms. He had already undergone 12 sessions of chiropractor therapy. The claimant was requested to obtain 6 sessions of acupuncture, Norflex for spasms, Norco for pain and Neurontin for neuropathy. He had been on opioids and NSAIDs (including Codeine and Nabumetone) for months for pain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**6 Acupuncture 2 Times a Week For 3 Weeks, In Treatment of the Lumbar Spine:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** According to the guidelines, Acupuncture" is used as an option when pain medication is reduced or not tolerated, it may be used as an adjunct to physical rehabilitation and/or surgical intervention to hasten functional recovery. Treatment can include 1-3 times per week for up to 6 sessions to see improvement. In this case, the claimant had received therapy and

chiropractor sessions. There is no indication that medications are not tolerated. In addition, the claimant had already undergone chiropractor therapy. The request for 6 Acupuncture 2 Times a Week for 3 Weeks, In Treatment of the Lumbar Spine may be beneficial but it is not medically necessary.

**Norco 2.5/325mg #60:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 82-92.

**Decision rationale:** Norco is a short acting opioid used for breakthrough pain. According to the MTUS guidelines it is not indicated as 1st line therapy for neuropathic pain, and chronic back pain. It is not indicated for mechanical or compressive etiologies. It is recommended for a trial basis for short-term use. Long Term-use has not been supported by any trials. In this case, the claimant had been on opioids for several months. There is no indication of failure of Tylenol. The request for Norco is not medically necessary.

**Norflex 100mg #60:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines muscle relaxants Page(s): 63.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines muscle relaxants Page(s): 63.

**Decision rationale:** Norflex is a muscle relaxant that is similar to diphenhydramine, but has greater anticholinergic effects. According to the MTUS guidelines, muscle relaxants are to be used with caution as a second-line option for short-term treatment of acute exacerbations in patients with chronic low back pain. Muscle relaxants may be effective in reducing pain and muscle tension, and increasing mobility. However, in most low back pain cases, they show no benefit beyond NSAIDs in pain and overall improvement. Also there is no additional benefit shown in combination with NSAIDs. Efficacy appears to diminish over time, and prolonged use of some medications in this class may lead to dependence. In this case, the claimant had been given Norflex for a month. Since efficacy wanes and the claimant had been on NSAIDs, the use of Norflex twice daily for a month is not medically necessary.