

<b>Case Number:</b>	CM14-0172271		
<b>Date Assigned:</b>	10/23/2014	<b>Date of Injury:</b>	02/11/2013
<b>Decision Date:</b>	11/21/2014	<b>UR Denial Date:</b>	09/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/17/2014

### 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 Orthopedic Surgery 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:

According to the records made available for review, this is a 63-year-old male with a 2/11/13 date of injury. At the time (9/4/14) of request for authorization for Phentermine 37.5mg (100) Tabs, there is documentation of subjective (constant low back pain and constant right knee pain) and objective (decreased lumbar range of motion and lumbar tenderness with spasm) findings, current diagnoses (sciatica and knee sprain/strain), and treatment to date (medications (NSAIDs, Cyclobenzaprine, and Tramadol), physical therapy, and home exercise program). There is no documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index 30 kg/m<sup>2</sup>, or 27 kg/m<sup>2</sup> in the presence of other risk factors (controlled hypertension, diabetes, hyperlipidemia), and the intention to treat over a short-term (a few weeks).

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Phentermine 37.5mg (100) Tabs:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.drugs.com/pro/phentermine.html>

**Decision rationale:** MTUS and ODG do not address the issue. Medical Treatment Guideline identifies documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index  $\geq 30$  kg/m<sup>2</sup>, or  $\geq 27$  kg/m<sup>2</sup> in the presence of other risk factors (e.g., controlled hypertension, diabetes, hyperlipidemia), as criteria necessary to support the medical necessity of short-term (a few weeks) course of Phentermine. Within the medical information available for review, there is documentation of diagnoses of sciatica and knee sprain/strain. However, there is no documentation of Phentermine used as adjunct in a regimen of weight reduction based on exercise, behavioral modification, and caloric restriction in the management of exogenous obesity for patients with an initial body mass index  $\geq 30$  kg/m<sup>2</sup>, or  $\geq 27$  kg/m<sup>2</sup> in the presence of other risk factors (controlled hypertension, diabetes, hyperlipidemia), and the intention to treat over a short-term (a few weeks). Therefore, based on guidelines and a review of the evidence, the request for Phentermine 37.5mg (100) Tabs is not medically necessary.