

Case Number:	CM14-0176926		
Date Assigned:	10/30/2014	Date of Injury:	09/30/2013
Decision Date:	12/05/2014	UR Denial Date:	09/20/2014
Priority:	Standard	Application Received:	10/25/2014

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, and is licensed to practice in Texas & Oklahoma. 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 24-year-old male who reported an injury on 09/30/2013 while working as a farmer; he was in a truck that collected almonds. He was walking backwards, slipped on the fine almond dust and fell 10 feet injuring his arm and back. The diagnoses included lumbosacral sprain/strain, right shoulder sprain/strain, cervical sprain/strain and thoracic sprain/strain. Medications included Norco 5/325 mg. Prior diagnostics performed on 11/07/2014 were unofficial revealed abnormal EMG of the lower extremities. The MRI performed on 04/24/2014 of the right shoulder revealed the supra greater than infraspinatus tendinitis. The MRI performed 04/24/2014 of the lumbar spine revealed a broad based central to predominantly left paracentral L4-5 disc protrusion/contained disc herniation, effacing the thecal sac and abutting upon and slightly distorting the proximal take off of the left L5 nerve root resulting in borderline soft tissue spinal stenosis. The deteriorative disc level changes at the L4-5 with slight disc space narrowing with a visualized annular compromise/tearing of the dorsal inferior margin of the disc herniation and congenitally tapering small normal thecal sac size enhancing the effects of the L4-5 disc herniation. Objective findings dated 10/09/2014 of the lumbar spine revealed: flexion to 25 degrees and extension to 10 degrees; 3/4 spasm and tenderness to the right mid back, lower back and buttocks; 3/4 tenderness to the right S1 joint; 2/4 to 3/4 spasm and tenderness to the right upper back; 2/4 spasm and tenderness across the neck; 2/4 to 3/4 spasm and tenderness to the left mid back/low back/buttocks; and 2/4 tenderness to the right short head of the biceps tendon and rotator cuff. Medications included Norco 5/325mg 1 at sleep. With a reported pain level of 5/10 using the VAS. The request for authorization dated 10/30/2014 was submitted within the documentation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 50 mg, ninety count: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Tramadol, Ongoing management Page(s): 82, 93, 94, 113,78.

Decision rationale: The request for Tramadol 50 mg, ninety count is not medically necessary. The California MTUS states generalized analgesic drugs such as Tramadol are reported to be effective in managing neuropathic pain and is not recommended as a first line oral analgesic. The California MTUS also recommends that there should be documentation of the 4 A's for ongoing monitoring of analgesics that include Analgesia, Activities of daily living, Adverse side effects, and Aberrant drug taking behavior. The clinical notes did not indicate that the aberrant drug taking behavior or activities of daily living had been monitored. The guidelines also indicate that Tramadol should not be the first line oral analgesic. Additionally, the clinical notes indicated that the injured worker was taking Norco and not the Tramadol. Additionally, the request did not address the frequency. As such, the request is not medically necessary.