

<b>Case Number:</b>	CM14-0034714		
<b>Date Assigned:</b>	06/20/2014	<b>Date of Injury:</b>	12/17/2004
<b>Decision Date:</b>	08/27/2014	<b>UR Denial Date:</b>	03/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	03/20/2014

### 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 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 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 61-year-old female who reported an injury on 12/17/2004 after she was lifting trash cans to empty into a dumpster. The injured worker reportedly sustained an injury to her right arm, shoulder, elbow, and wrist. The injured worker developed chronic pain that was managed with medications. The injured worker was evaluated on 03/10/2014. It was documented that the injured worker had ongoing neck, right arm, and elbow pain. The injured worker's medication schedule included Norco 10/325 mg every 6 to 8 hours, Anaprox 550 mg twice a day, Sumatriptan 50 mg up to 2 a day, TG Hot applied to affected area 3 times a day, Lyrica 50 mg daily, Cymbalta 20 mg daily. It was noted that the injured worker had 9/10 pain without medications. The injured worker's diagnoses included shoulder joint pain, upper arm pain, headache, and depressive reactive disorder. The injured worker's treatment plan included continued medications and a daily stretching and activity program.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TGHOT topical compound cream (Tramadol 8%, Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin 0.05%) 30 grams (in office)(date of service 02/10/2014):**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Effectiveness of topical administration of opioids in palliative care: a systematic review; B LeBon, G Zeppetella, IJ Higginson - Journal of pain and symptoms,2009 - Elsevier.

**Decision rationale:** The requested TG Hot topical compound cream (Tramadol 8%, Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin 0.05% (30 grams) in office) (date of service 02/10/2014) is not medically necessary or appropriate. The California Medical Treatment Utilization Schedule does not support the use of Capsaicin as a topical analgesic unless there is documented failure to respond to first line medications and treatments to include anticonvulsants and antidepressants. The clinical documentation submitted for review does not provide any evidence that the patient has failed to respond to first line medications to include antidepressants and anticonvulsants. Additionally, California Medical Treatment Utilization Schedule does not support the use of Gabapentin as there is little scientific evidence to support the efficacy and safety of this type of medication in a topical formulation. The California Medical Treatment Utilization Schedule and Official Disability Guidelines do not address the topical use of opioids. Peer-reviewed literature does not support the use of topical opioids such as Tramadol as there is little scientific evidence to support the efficacy and safety of this type of medication in a topical formulation. As such, the requested TG Hot topical compound cream (Tramadol 8%, Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin 0.05% (30 grams) in office) (date of service 02/10/2014) is not medically necessary or appropriate.

**TGHOT topical compound cream (Tramadol 8%,Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin0.05%) 240 grams (to be mailed): Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics, page(s) 111 Page(s): 111. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Effectiveness of topical administration of opioids in palliative care: a systematic review B LeBon, G Zeppetella, IJ Higginson - Journal of pain and symptoms,2009 - Elsevier.

**Decision rationale:** The requested TGHOT topical compound cream (Tramadol 8%,Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin0.05%) 240 grams (to be mailed) is not medically necessary or appropriate. The California Medical Treatment Utilization Schedule does not support the use of Capsaicin as a topical analgesic unless there is documented failure to respond to first line medications and treatments to include anticonvulsants and antidepressants. The clinical documentation submitted for review does not provide any evidence that the patient has failed to respond to first line medications to include antidepressants and anticonvulsants. Additionally, California Medical Treatment Utilization Schedule does not support the use of

Gabapentin as there is little scientific evidence to support the efficacy and safety of this type of medication in a topical formulation. The California Medical Treatment Utilization Schedule and Official Disability Guidelines do not address the topical use of opioids. Peer-reviewed literature does not support the use of topical opioids such as tramadol as there is little scientific evidence to support the efficacy and safety of this type of medication in a topical formulation. As such, the requested TGHOT topical compound cream (Tramadol 8%, Gabapentin 10%, Menthol 2%, Camphor 2%, and Capsaicin 0.05%) 240 grams (to be mailed) is not medically necessary or appropriate.

**Flurbiprofen 25% and Capsaicin 0.0275% Topical Compound 30 grams:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

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

**Decision rationale:** The requested Flurbiprofen 25% and Capsaicin 0.0275% topical compound 30 grams is not medically necessary or appropriate. California Medical Treatment Utilization Schedule does not recommend the topical use of Capsaicin unless there is documentation that injured worker has failed to respond to first line treatments such as anticonvulsants and antidepressants. The clinical documentation fails to provide any evidence that the patient does not have pain relief resulting from antidepressants or anticonvulsants. Therefore, the need for this medication in a topical formulation is not supported. Additionally, California Medical Treatment Utilization Schedule only recommends the use of topical nonsteroidal antiinflammatory drugs if there is documentation of an inability to tolerate these medications in an oral formulation. There is no documentation that the injured worker cannot tolerate oral formulations of nonsteroidal antiinflammatory drugs. As such, the requested flurbiprofen 25% and capsaicin 0.0275% topical compound 30 grams is not medically necessary or appropriate.