

<b>Case Number:</b>	CM14-0052384		
<b>Date Assigned:</b>	11/14/2014	<b>Date of Injury:</b>	03/10/2009
<b>Decision Date:</b>	12/23/2014	<b>UR Denial Date:</b>	03/20/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/21/2014

### 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 Occupational 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:

This is a 57 year old female who has reported upper extremity symptoms and mental illness after an injury on 03/10/09. Diagnoses have included shoulder impingement, depression, rotator cuff tear, elbow epicondylitis, and adhesive capsulitis. Treatment has included H-Wave, physical therapy, psychotherapy, injections, right shoulder decompression and manipulation, and many medications. The injured worker has continued to see her pain management physician, who prescribes the various medications, and an orthopedic surgeon who prescribes physical therapy, total disability, and has given injections in the recent past. Records of the pain management physician since 2013 list Voltaren gel as an ongoing medication since at least September 2013. Those same records note progressive, worsening shoulder pain and poor function. The reports do not discuss the specific results of using Voltaren gel, and there is no evidence of any tests for toxicity. The AME report of 9/4/13 lists Celebrex as a current medication but not Voltaren. The AME noted a diagnosis of high blood pressure. Per the PR2 of 3/4/14, there was ongoing and severe shoulder pain, rated as 10/10. Current medications included Voltaren [not stated if topical or oral], Norco, Tizanidine, and Methadone. The blood pressure was 120/100. There was shoulder swelling, tenderness, and limited range of motion. The treatment plan included prescriptions for Celebrex (new prescription), Methadone, Norco, tizanidine, and Voltaren gel (for the shoulder). On 3/20/14 Utilization Review non-certified Voltaren gel, noting the lack of indications for the shoulder and the lack of a sufficient trial of first line agents. The MTUS was cited.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Voltaren 1% gel #5 - 100gm DOS: 03/04/2014: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-112.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Medications for chronic pain Topical Medications NSAIDS, specific drug list & adverse effects. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: FDA MedWatch, 12/5/09: Voltaren Gel (diclofenac sodium topical gel) 1% - Hepatic Effects Labeling Changes

**Decision rationale:** Per the California Medical Treatment Utilization Schedule (MTUS), topical NSAIDs for short term pain relief may be indicated for pain in the extremities caused by osteoarthritis or tendonitis. There is no good evidence supporting topical NSAIDs for shoulder or axial pain. This injured worker was also given an oral NSAID (Celebrex), making a topical NSAID duplicative and unnecessary, as well as possibly toxic. Note the FDA warning above. There is no evidence in this case that the prescribing physician is carefully monitoring for liver toxicity, as no reports show that any liver tests were performed. Per the MTUS for chronic pain, page 60, medications should be trialed one at a time, and there should be functional improvement with each medication. No reports show any specific benefit, functional or otherwise. Pain and function have worsened while this injured worker has been prescribed Voltaren gel. Blood pressure was 120/100 when both Celebrex and Voltaren were prescribed. NSAIDs can cause or aggravate high blood pressure. The elevated blood pressure was not addressed by the treating physician. Voltaren and Celebrex are not the drugs of choice in the setting of high blood pressure. Ongoing use of Voltaren gel is not medically necessary for the reasons listed above.