

<b>Case Number:</b>	CM14-0054006		
<b>Date Assigned:</b>	07/07/2014	<b>Date of Injury:</b>	12/23/2006
<b>Decision Date:</b>	08/15/2014	<b>UR Denial Date:</b>	03/27/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/23/2014

### 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:

The applicant is a represented [REDACTED] employee who has filed a claim for chronic neck and low back pain reportedly associated with an industrial injury of December 23, 2006. Thus far, the applicant has been treated with the following: Analgesic medications; attorney representations; transfer of care to and from various providers in various specialties; earlier cervical spine surgeries; lumbar spine surgery; adjuvant medications; and unspecified amounts of chiropractic manipulative therapy, acupuncture, and physical therapy over the course of the claim. In a Utilization Review Report dated March 27, 2014, the claims administrator approved a request for Cymbalta and gabapentin while denying a 'pain cocktail.' The claims administrator interpreted the pain cocktail as some form of compounded medication with unknown ingredients. The applicant's attorney subsequently appealed. It appears that the cocktail in question was requested via a request for authorization form dated March 19, 2014, in which the applicant was described as having persistent complaints of pain, multifocal: "12/10." The applicant stated that she was only able to lift articles weighing less than 5 pounds. The applicant was on Cymbalta and gabapentin for pain-relief purposes, which, somewhat incongruously, she stated that she found somewhat helpful. A pain cocktail was prescribed, along with Cymbalta and Neurontin. The applicant was kept off of work, on total temporary disability. It appeared that the pain cocktail in question represented a renewal request, although this was not clearly stated. On an earlier note of August 29, 2013, the applicant was described as using Norco, Zanaflex, and Ambien.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Pain Cocktail M-2 Z-4 1800cc x 30 1/2 days:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 47, Chronic Pain Treatment Guidelines Topical Analgesics topic Page(s): 111.

**Decision rationale:** The request in question appears to represent some form of topical compounded drug. As noted in the MTUS-adopted ACOEM Guidelines in Chapter 3, page 47, however, oral pharmaceuticals are a first-line palliative method. In this case, the applicant's ongoing usage of numerous first-line oral pharmaceuticals, including Norco, Zanaflex, Cymbalta, Neurontin, etc. effectively obviates the need for what page 111 of the MTUS Chronic Pain Medical Treatment Guidelines deems largely "experimental" topical agents such as the pain cocktail in question. No rationale for ongoing usage of the same was provided so as to offset the unfavorable MTUS recommendations. The ingredients in the compound were not clearly stated. Therefore, the request is not medically necessary.