

Case Number:	CM14-0078449		
Date Assigned:	07/18/2014	Date of Injury:	08/17/2005
Decision Date:	09/08/2014	UR Denial Date:	05/16/2014
Priority:	Standard	Application Received:	05/28/2014

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 Anesthesiology, has a subspecialty in Pain Management 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 43-year-old female with a 8/17/05 date of injury. At the time (5/16/14) of request for authorization for Lidopro topical ointment 4oz, there is documentation of subjective (neck, bilateral upper and lower extremity symptoms; low back pain) and objective (tenderness at bilateral cervical and lumbar paraspinals, decreased cervical and lumbar range of motion in all planes, decreased sensation to the right C6 and C& dermatomes, pain with palpation of the right triceps with spasm; decreased sensation bilateral L4, L5 and S1 dermatomes, 4/5 muscle strength deltoids, biceps, and internal and external rotators; 4/5 muscle strength wrist flexors, and grip strength, tibialis anterior and 5-/5 at left tibial anterior and extensor hallucis longus) findings, current diagnoses (multilevel herniated nucleus pulposus of the cervical spine most significant at C5-6 with contact and distortion of the ventral surface of the cervical cord; herniated nucleus pulposus lumbar spine at L4-5 with mild stenosis and annular fissure, facet arthropathy of the lumbar spine, myelopathy, right scapholunate ligamentous injure per MRI, bilateral shoulder impingement bursitis, cervical radiculopathy, and lumbar radiculopathy), and treatment to date (physical therapy, epidural steroid injections, TENS, splinting, chiropractic, and medications (including Tramadol, Norflex, and Trazodone).

IMR ISSUES, DECISIONS AND RATIONALES

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

Lidopro Topical Ointment 4oz: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics.

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

Decision rationale: MTUS Chronic Pain Medical Treatment Guidelines identifies that many agents are compounded as monotherapy or in combination for pain control; that ketoprofen, lidocaine (in creams, lotion or gels), capsaicin in a 0.0375% formulation, baclofen and other muscle relaxants, and gabapentin and other antiepilepsy drugs are not recommended for topical applications; and that any compounded product that contains at least one drug (or drug class) that is not recommended, is not recommended. Within the medical information available for review, there is documentation of diagnoses of multilevel herniated nucleus pulposus of the cervical spine most significant at C5-6 with contact and distortion of the ventral surface of the cervical cord; herniated nucleus pulposus lumbar spine at L4-5 with mild stenosis and annular fissure, facet arthropathy of the lumbar spine, myelopathy, right scapholunate ligamentous injure per MRI, bilateral shoulder impingement bursitis, cervical radiculopathy, and lumbar radiculopathy. However, Lidopro contains at least one drug (lidocaine in a lotion) that is not recommended. Therefore, based on guidelines and a review of the evidence, the request for Lidopro topical ointment 4oz is not medically necessary.