

<b>Case Number:</b>	CM14-0080316		
<b>Date Assigned:</b>	07/18/2014	<b>Date of Injury:</b>	10/06/2000
<b>Decision Date:</b>	08/18/2014	<b>UR Denial Date:</b>	05/15/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/01/2014

### 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 and Rehabilitation, has a subspecialty in Interventional Spine 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 patient is a 57 year old male with an injury date of 10/06/00. Based on the 01/16/14 progress report provided by [REDACTED], the patient complains of right knee pain, stiffness, and instability. The patient has moderate tenderness about the lateral aspect, medial aspect, and over the patellofemoral joint. He tested positive on the right for the McMurray test and the Patellar Grind Test. The patient's diagnoses include the following: Status post right knee arthroscopy, Chondromalacia right knee, and Early arthritis of the right knee the physician is requesting for Fentanyl patch 50 mcg/ hr to allow patient this one refill Fentanyl patch 50 mcg/ hr #10 for the purpose of weaning to discontinue, with reduction of MED by 10%- 20% per week over weaning period of 2-3 months. The utilization review determination being challenged is dated 05/15/14. The requesting provider, provided treatment reports from 12/12/13- 02/13/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Fentanyl Patch 50mcg/hr to allow the patient this one refill of Fentanyl patch 50mcg/hr #10 for the purpose of weaning to discontinue, with a reduction of MED by 10%-20% per week over a weaning period of 2-3 months:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Duragesic (fentanyl) Opioids: When to discontinue Opioids, When to continue Opioids.  
Decision based on Non-MTUS Citation Official Disability Guidelines: Pain Opioids.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Medications for chronic pain (MTUS 60,61)CRITERIA FOR USE OF OPIOIDS (MTUS pgs 88, 89) Page(s): 60,61; 88, 89.

**Decision rationale:** According to the 01/16/14 report by [REDACTED], the patient presents with right knee pain, stiffness, and instability. The request is for Fentanyl patch 50 mcg/ hr to allow patient this one refill Fentanyl patch 50 mcg/ hr #10 for the purpose of weaning to discontinue, with reduction of MED by 10%- 20% per week over weaning period of 2-3 months. The patient has been taking Fentanyl patches 50 mcg/ hr since 01/16/14. The 02/13/14 report states "Fentanyl patch caused dizziness." No specific ADLs or pain scales were mentioned. Fentanyl Patches release fentanyl, a potent opioid, slowly through the skin. For chronic opiate use, MTUS guidelines page 88 and 89 require functioning documentation using a numerical scale or validated instrument at least once every 6 months as well as documentation of the 4 A's (analgesia, ADLs, adverse side effects, adverse behavior) are required. None of the reports provided discuss how Fentanyl patches have been helpful in terms of decreased pain or functional improvement; the treater mentions that these patches cause dizziness. The treater is attempting to wean off the use of Fentanyl patch within 2-3 months; therefore, recommendation is for authorization.