

Case Number:	CM14-0082067		
Date Assigned:	07/18/2014	Date of Injury:	12/22/2006
Decision Date:	08/29/2014	UR Denial Date:	05/07/2014
Priority:	Standard	Application Received:	06/02/2014

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 57-year-old male with a 12/22/06 date of injury, and status post right total knee replacement 4/29/13. At the time (5/7/14) of request for authorization for Flurbiprofen/Gabapentin/Lidocaine cream, there is documentation of subjective (ongoing pain in the low back which radiates down the right lower extremity through the hip to the foot) and objective (pain to palpation from L3-S1, mid spine and left and right paraspinal musculature, decreased sensitivity and allodynia to light touch to the posterolateral aspect of both lower extremities extending from the mid buttocks and down to the calves and ankle, positive straight leg raise on the right, 4/5 muscle strength to flexion, extension, and extensor hallucis longus function) findings, current diagnoses (degenerative joint disease and osteoarthritis of the right knee, status post ACL repair and loose body removal and total knee replacement; degenerative disc disease of the lumbosacral spine with bilateral L5 radiculopathy; rule out cervical degenerative disc disease and herniated nucleus pulposus of the cervical spine), and treatment to date (epidural steroid injection, activity modification, chiropractic, physical therapy, and medications).

IMR ISSUES, DECISIONS AND RATIONALES

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

Flubiprofen/Gabapentin/Lidocaine cream: Upheld

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

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 degenerative joint disease and osteoarthritis of the right knee, status post ACL repair and loose body removal and total knee replacement; degenerative disc disease of the lumbosacral spine with bilateral L5 radiculopathy; rule out cervical degenerative disc disease and herniated nucleus pulposus of the cervical spine. However, Flurbiprofen/Gabapentin/Lidocaine cream contains at least one drug (gabapentin and lidocaine) that is not recommended. Therefore, based on guidelines and a review of the evidence, the request for Flurbiprofen/Gabapentin/Lidocaine cream is not medically necessary.