

<b>Case Number:</b>	CM14-0091308		
<b>Date Assigned:</b>	07/25/2014	<b>Date of Injury:</b>	05/07/2012
<b>Decision Date:</b>	12/11/2014	<b>UR Denial Date:</b>	05/20/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/18/2014

### 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 Pain Management and Rehabilitation, 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 patient sustained an injury on 5/7/12 while employed by [REDACTED]. Request(s) under consideration include Topical Compound Flurbiprofen/ Cyclobenzaprine/ Menthol Cream ( 20%, 10%, 4%) 180g. Diagnoses included Disc herniation at L5-S1 with bilateral lower extremity radicular pain; thoracic spine sprain/strain; and cervical spine strain/sprain. Report of 4/28/14 from the provider noted chronic lumbar spine pain rated at 5/10 radiating to legs with numbness; patient continues on Tramadol and Naprosyn. Exam showed unchanged lumbar spine with limited range; positive SLR radiating in L4 nerve distribution on right; tenderness, hypertonicity. Treatment included MRI of lumbar spine, chiropractic treatment, yoga, and medications to include Tramadol, Naproxyn, and topical compound. Report of 8/7/14 from the provider noted the patient with ongoing chronic unchanged cervical, thoracic, and lumbar spine pain rated at 6-9/10 with radiation to mid upper back and bilateral legs associated with spasm; medications of Tramadol and Anaprox provide pain relief. Exam showed unchanged cervical spine tenderness over paraspinals and trapezius; lumbar spine with decreased range and tenderness over paraspinals, muscle spasm T4-8; positive Kemp's at bilateral lumbar; normal 5/5 at L4, L5, and S1 motor strength with intact DTRs of 2+ symmetrically. Treatment included chiropractic treatment, medications Soma, Prilosec, Tramadol, and topical compound Diclofenac/Lidocaine cream; and lightweight boots. The request(s) for Topical Compound Flurbiprofen/ Cyclobenzaprine/ Menthol Cream ( 20%, 10%, 4%) 180g was non-certified on 5/20/14 citing guidelines criteria and lack of medical necessity.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Flurbiprofen/Cyclobenzaprine/Menthol Cream ( 20%, 10%, 4%) 180g: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Medical Guidelines.

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

**Decision rationale:** This patient sustained an injury on 5/7/12 while employed by [REDACTED] Request(s) under consideration include Topical Compound Flurbiprofen/ Cyclobenzaprine/ Menthol Cream (20%, 10%, 4%) 180g. Diagnoses included Disc herniation at L5-S1 with bilateral lower extremity radicular pain; thoracic spine sprain/strain; and cervical spine strain/sprain. Report of 4/28/14 from the provider noted chronic lumbar spine pain rated at 5/10 radiating to legs with numbness; patient continues on Tramadol and Naprosyn. Exam showed unchanged lumbar spine with limited range; positive SLR radiating in L4 nerve distribution on right; tenderness, hypertonicity. Treatment included MRI of lumbar spine, chiropractic treatment, yoga, and medications to include Tramadol, Naproxyn, and topical compound. Report of 8/7/14 from the provider noted the patient with ongoing chronic unchanged cervical, thoracic, and lumbar spine pain rated at 6-9/10 with radiation to mid upper back and bilateral legs associated with spasm; medications of Tramadol and Anaprox provide pain relief. Exam showed unchanged cervical spine tenderness over paraspinals and trapezius; lumbar spine with decreased range and tenderness over paraspinals, muscle spasm T4-8; positive Kemp's at bilateral lumbar; normal 5/5 at L4, L5, and S1 motor strength with intact DTRs of 2+ symmetrically. Treatment included chiropractic treatment, medications Soma, Prilosec, Tramadol, and topical compound Diclofenac/Lidocaine cream; and lightweight boots. The request(s) for Topical Compound Flurbiprofen/ Cyclobenzaprine/ Menthol Cream (20%, 10%, 4%) 180g was non-certified on 5/20/14. Per MTUS Chronic Pain Guidelines, the efficacy in clinical trials for topical analgesic treatment modality has been inconsistent and most studies are small and of short duration. These medications may be useful for chronic musculoskeletal pain, but there are no long-term studies of their effectiveness or safety. There is little evidence to utilize topical compound analgesic over oral NSAIDs or other pain relievers for a patient with spinal and multiple joint pain without contraindication in taking oral medications. It is also unclear why the patient is being prescribed 2 concurrent anti-inflammatories, oral Naproxen and topical compounded Flurbiprofen posing an increase risk profile without demonstrated extenuating circumstances and indication. Submitted reports have not adequately demonstrated the indication or medical need for this topical analgesic for this chronic injury of 2012 without documented functional improvement from treatment already rendered. The Topical Compound Flurbiprofen/ Cyclobenzaprine/ Menthol Cream (20%, 10%, 4%) 180g is not medically necessary and appropriate.