

<b>Case Number:</b>	CM14-0091526		
<b>Date Assigned:</b>	07/25/2014	<b>Date of Injury:</b>	11/16/2004
<b>Decision Date:</b>	09/29/2014	<b>UR Denial Date:</b>	05/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/17/2014

### 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 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 injured worker is a 55 year old female injured on 11/16/04. The mechanism of injury is undisclosed. Diagnoses include lumbar radiculopathy, secondary depression, insomnia, stomach upset, right knee pain, status post motor vehicle accident, and back strain. The clinical note dated 05/06/14 indicated the injured worker presented complaining of low back pain with radiation to the bilateral lower extremities, right greater than left with dyesthesia and sensitivity in the lower extremities, right hip pain, depression due to chronic pain, sleep difficulty, gastrointestinal upset due to medications, knee pain due to gait dysfunction, and intermittent bowel and urine incontinence due to pain. The injured worker rated the pain at 10/10. The documentation indicated the injured worker utilized a back brace, ice, walker, and Orthostim. Physical examination revealed antalgic gait, reflexes 2/4 except left ankle 1/4, decreased sensation to the right lower extremity in the L5 dermatome at the top of the foot, decreased range of motion in the lumbar spine, positive straight leg raising test bilaterally, slight swelling of the right knee with tenderness of the medial joint line, and patellar region with decreased extension and flexion. The documentation indicated the mechanism of injury was a slip and fall in water. The treatment plan included referral to neurosurgery consultation, home exercise program, psychiatric consultation, authorization for housework help, and prescription medications. Prescriptions for Opana immediate release (IR), Norco 10/325 milligrams, Soma, Celebrex, Promolaxin, Prozac, Zipsor, and Methoderm cream. Intent to discontinue Ambien and Naproxen noted. The initial request for topical Methoderm cream was initially noncertified on 05/22/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Topical Mentherm Cream:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Chronic Pain Treatment Guidelines; Topical Analgesic Creams; compounded medication.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate topicals Page(s): 105.

**Decision rationale:** As noted in the MTUS Chronic Pain Guidelines, salicylate topicals are recommended in the treatment of chronic pain. This compound is known to contain menthol and methyl salicylate. Topical salicylate (e.g., BenGay, methyl salicylate) is significantly better than placebo in chronic pain. However, there is no indication in the documentation that the injured worker cannot utilize the readily available over the counter version of this medication without benefit. As such, the request for topical Mentherm cream cannot be recommended as medically necessary.