MAXIMUS Federal Services

Case Number:	CM14-0191356		
Date Assigned:	11/25/2014	Date of Injury:	03/27/2014
Decision Date:	01/09/2015	UR Denial Date:	11/06/2014
Priority:	Standard	Application Received:	11/17/2014

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 Family Medicine and is licensed to practice in Texas and 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 is a 37 year old male who sustained an injury on03/27/2014. The current diagnoses include lumbar radiculitis and displacement of lumbar intervertebral disc without myelopathy. He sustained the injury when he pushed over three plant bases weighing approximately 200 pounds each but on the third one, he felt something pull in his low back. Per the doctor's note dated 10/31/2014, he had complaints of low back pain with radiation to the right leg with tingling, numbness and weakness. Physical examination revealed lumbar range of motion- flexion 60, extension 20, side bending 25 degrees bilaterally and limited rotation, lumbar paraspinal tenderness and spasm and positive seated straight leg raising test at 50 degrees on the right side, diminished sensation in the right L4 and L5 dermatomes and reflex at the right ankle. The medications list includes naproxen, tramadol and Prilosec. He has had magnetic resonance imaging (MRI) of the lumbar spine dated 9/03/14 which revealed degenerative disc disease at multiple levels with disc bulges and facet hypertrophic changes, most notably at L2-3, L3-4, L4-5 and L5-S1, and a broad based disc bulge at L2-3 with a high intensity zone that may because of back pain in the posterior annulus. He has had chiropractic treatment for this injury. He has had urine drug screen on 8/21/14 which was negative and screening on 10/30/14 which was positive for tramadol.

IMR ISSUES, DECISIONS AND RATIONALES

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

Prilosec 20 mg bid #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, GI symptoms & cardiovascular risk Page(s): 68. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain, Proton pump inhibitors

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, GI symptoms & cardiovascular risk Page(s): 68-69.

Decision rationale: Prilosec contains omeprazole which is a proton pump inhibitor. Per the California MTUS NSAIDs guidelines cited above, regarding use of proton pump inhibitors with NSAIDs, the MTUS Chronic Pain Guidelines recommend PPIs in, "Patients at intermediate risk for gastrointestinal events. Patients at high risk for gastrointestinal events. Treatment of dyspepsia secondary to NSAID therapy." Per the cited guidelines, patient is considered at high risk for gastrointestinal events with the use of NSAIDS when- " (1) age > 65 years; (2) history of peptic ulcer, GI bleeding or perforation; (3) concurrent use of ASA, corticosteroids, and/or ananticoagulant; or (4) high dose/multiple NSAID (e.g., NSAID + low-dose ASA)." There is no evidence in the records provided that the patient has abdominal/gastric symptoms with the use of NSAIDs. The records provided do not specify the duration of the NSAID therapy. The records provided do not specify any objective evidence of gastrointenstinal disorders, gastrointenstinal bleeding or peptic ulcer. The medical necessity of Prilosec 20 mg bid #60 is not established for this patient at this time.