

<b>Case Number:</b>	CM14-0191746		
<b>Date Assigned:</b>	11/25/2014	<b>Date of Injury:</b>	06/15/2002
<b>Decision Date:</b>	01/12/2015	<b>UR Denial Date:</b>	10/30/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 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 6/15/2002 while employed by [REDACTED]. Request(s) under consideration include Clonazepam 0.5 mg #30. Diagnoses include Peripheral Enthesopathies and Allied syndromes; right foot/ankle tendonitis; lumbar spine s/s rule out disc disease; and OS navicular. Hand-written illegible reports of 6/3/14, 7/1/14, and 8/26/14 from the podiatric provider noted the patient with increased right foot/ankle pain rated at 2/10 increased to 4-5/10 from the repetitive use; edema at lower leg. Exam showed moderate tenderness with edema at right lower leg ankle, medial midfoot with painful range; walks with limp; orthotics are ineffective. Treatment was for orthotic replacement. The patient remained P&S. Hand-written report of 10/16/14 was essentially identical and noted patient with continued unchanged painful right foot/ankle and lower leg rated at 2/10 increased to 4/10. Exam showed unchanged tenderness and edema with painful range. Treatment included 3 pairs of stocking as current are worn out and Rx for Clonazepam. The request(s) for Clonazepam 0.5 mg #30 was non-certified on 10/30/14 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:

**Clonazepam 0.5 mg #30:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines  
Benzodiazepines Page(s): 23.

**Decision rationale:** This patient sustained an injury on 6/15/2002 while employed by [REDACTED]. Request(s) under consideration include Clonazepam 0.5 mg #30. Diagnoses include Peripheral Enthesopathies and Allied syndromes; right foot/ankle tendonitis; lumbar spine s/s rule out disc disease; and OS navicular. Hand-written illegible reports of 6/3/14, 7/1/14, and 8/26/14 from the podiatric provider noted the patient with increased right foot/ankle pain rated at 2/10 increased to 4-5/10 from the repetitive use; edema at lower leg. Exam showed moderate tenderness with edema at right lower leg ankle, medial midfoot with painful range; walks with limp; orthotics are ineffective. Treatment was for orthotic replacement. The patient remained P&S. Hand-written report of 10/16/14 was essentially identical and noted patient with continued unchanged painful right foot/ankle and lower leg rated at 2/10 increased to 4/10. Exam showed unchanged tenderness and edema with painful range. Treatment included 3 pairs of stocking as current are worn out and Rx for Clonazepam. The request(s) for Clonazepam 0.5 mg #30 was non-certified on 10/30/14. Clonazepam is an anti-anxiety medication in the benzodiazepine family and like other benzodiazepines, act by enhancing the effects of gamma-aminobutyric acid (GABA) in the brain. GABA is a neurotransmitter (a chemical that nerve cells use to communicate with each other) which inhibits many of the activities of the brain. It is believed that excessive activity in the brain may lead to anxiety or other psychiatric disorders. Clonazepam also is used to prevent certain types of seizures. Clonazepam is used for the short-term relief of the symptoms of anxiety. It is used for certain types of seizures, specifically petit mal seizures, akinetic seizures, and myoclonus, as well as Lennox-Gastaut syndrome. Submitted reports have not adequately addressed the indication for Clonazepam's continued use for the 2002 P&S injury nor is there documented functional efficacy from treatment already rendered. Clonazepam 0.5 mg #30 is not medically necessary and appropriate.