

<b>Case Number:</b>	CM14-0197861		
<b>Date Assigned:</b>	12/08/2014	<b>Date of Injury:</b>	05/13/2011
<b>Decision Date:</b>	01/23/2015	<b>UR Denial Date:</b>	10/28/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/25/2014

### 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 Physical Medicine Rehab, 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:

This is a patient with a date of injury of May 13, 2011. A Utilization Review determination dated October 28, 2014 recommends non-certification of "probiotics." Non-certification was recommended since the patient does not have a diagnosis of irritable bowel syndrome. A progress report dated August 14, 2014 identifies subjective complaints of neck pain, upper extremity pain, headaches, low back pain, right leg pain, stomach pain, insomnia, memory loss, visual changes, and ringing in the ears. The note indicates that Promolaxin improves her bowel function so she has daily stools. Protonix relieves her stomach pain. The patient denies any symptoms of regurgitation, abdominal pain, or GI abnormalities. Diagnoses include nausea and vomiting and oral mucocutaneous candidiasis, and constipation related to the use of opioid analgesics. The treatment plan recommends continuing Hydrocodone, Fexmid, Acetadryl, Synovacin, Dendracin, Zantac, Zofran, probiotic therapy through home dietary program, lumbosacral stretching, and an epidural steroid injection.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Probiotics #60:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation [www.drugs.com](http://www.drugs.com)

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain Chapter, Opioid Induced Constipation Treatment

**Decision rationale:** Regarding the request for Probiotics, California MTUS does not contain criteria regarding constipation treatment. Official Disability Guidelines states that opioid induced constipation is recommended to be treated by physical activity, maintaining appropriate hydration, and following a diet rich in fiber. Over-the-counter medication such as stool softeners may be used as well. Second line treatments include prescription medications. Within the documentation available for review, there are no recent subjective complaints of constipation. There is no statement indicating whether the patient has tried adequate hydration, well-balanced diet, and activity to reduce the complaints of constipation should they exist. Additionally, it appears the patient has responded well to the current GI treatment regimen. The most recent progress report indicates that the patient complains of no GI abnormalities and that the current regimen improves her bowel function so she has daily stools. Guidelines do not support the use of probiotics for the treatment of opioid induced constipation. In the absence of clarity regarding those issues, the currently requested Probiotics are not medically necessary.