

<b>Case Number:</b>	CM14-0208946		
<b>Date Assigned:</b>	12/22/2014	<b>Date of Injury:</b>	12/06/2013
<b>Decision Date:</b>	02/17/2015	<b>UR Denial Date:</b>	11/17/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/12/2014

### 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 Interventional spine 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 patient is a 50 year old male with the injury date of 12/05/13. Per physician's report 11/05/14, the patient has neck pain at 5-6/10, radiating up to head and causing headaches The patient has tried physical therapy, TPIs and Tens. The patient states that the combination of Pristiq, Flexeril, Celebrex and Gabapentin are helpful in mood, functionality and pain. The patient is currently taking Celebrex, Cyclobenzaprine, Gabapentin, Pristiq and Omeprazole. The patient presents limited range of cervical motion. His cervical extension is 10 degrees and lateral rotation is 15 degrees bilaterally. The diagnosis is Cervicalgia. Per 09/18/14 progress report, the patient continues to have neck pain and headaches. "With Pristiq he feels somewhat improved and he notes Toradol and injections in the upper back and neck reduced his overall pain level down to somewhat manageable, although [his pain is] still severe." The lists of diagnoses are: 1) Closed head injury 2) Cervical sprain 3) Left shoulder sprain with possible labral tear/rotator cuff tear 4) Thoracic sprain, lumbar sprain 5) Chronic pain 6) Posttraumatic migraine Per 08/15/14 progress report, the patient has neck pain at 6/10, radiating down arms bilaterally. The patient takes Celebrex and Omeprazole. The utilization review determination being challenged is dated on 11/17/14. Treatment reports were provided from 02/28/14 to 12/10/14.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Pristiq ER 50Mg with 2 Refills:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Antidepressants Page(s): 13-16. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness & Stress Chapter, Desvenlafaxine (Pristiq).

**Decision rationale:** The patient presents with neck pain and headaches. The request is for Pristiq ER 50mg with 2 refills. The patient is currently taking Celebrex, Cyclobenzaprine, Gabapentin, Pristiq and Omeprazole. The patient has been utilizing Pristiq since at least 09/18/14. MTUS Guidelines, page 13-16 for Antidepressants for chronic pain recommend Pristiq as a first line option for neuropathic pain, and as a possibility for non-neuropathic pain. ODG guidelines, under Drug Formulary, state Desvenlafaxine (Pristiq) is recommended for depression and as an option in first-line treatment of neuropathic pain. In this case, none of the reports indicate depression or neuropathic pain for which this medication may be indicated. The treater does provide that "With Pristiq [the patient] feels somewhat improved." The patient does suffer from chronic pain due to traumatic brain injury and likely suffers from depression as well. The request is medically necessary.