

<b>Case Number:</b>	CM14-0022292		
<b>Date Assigned:</b>	05/07/2014	<b>Date of Injury:</b>	11/29/2008
<b>Decision Date:</b>	11/30/2015	<b>UR Denial Date:</b>	02/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/21/2014

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 58 year old female, who sustained an industrial-work injury on 11-29-08. A review of the medical records indicates that the injured worker is undergoing treatment for internal derangement of the right knee with lateral meniscus tear, sleep issues and depression. Treatment to date has included pain medication tried Tramadol, Naproxen, Prilosec, Medrox patches, Motrin, and using Terocin patches and Lidopro lotion since at least 11-21-13, ice, diagnostics, Transcutaneous electrical nerve stimulation (TENS), physical therapy, and other modalities. Medical records dated (11-21-13 to 1-30-14) indicate that the injured worker complains of constant right knee pain with spasm and numbness and tingling daily. The pain increases with prolonged standing or walking. She reports increased pain in the right knee with lying down and that the pain wakes her during the night. She reports that Terocin patches and Lidopro lotion are helpful in decreasing the pain. The pain was 5-6 out of 10 on pain scale on 11-21-13. The pain was rated 3 out of 10 on the pain scale on 12-30-13 and the pain was rated 6-8 out of 10 on the pain scale on 1-30-14. The injured worker is retired. The physician indicates that the topical medications are so there are no further oral medications added and the injured worker prefers not to take oral medications. The physical exam dated 1-30-14 reveals that the right knee extends to 180 degrees and flexes to 110 degrees with crepitation noted. The requested services included Terocin patches Qty: 20.00 and Lidopro lotion 4 ounces Qty: 1.00. The original Utilization review dated 2-10-14 non-certified the request for Terocin patches Qty: 20.00 and Lidopro lotion 4 ounces Qty: 1.00.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Lidopro lotion 4 ounces Qty: 1.00:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Lidoderm (lidocaine patch), Topical Analgesics.

**Decision rationale:** The claimant sustained a work injury in November 2008 when, while working as a registered nurse, she was restraining an inmate and injured her right knee. Treatments have included medications and physical therapy. An MRI of the right knee showed findings of a meniscal tear and surgery was recommended which was declined by the claimant. When seen, she was having constant knee pain rated at 6-8/10. Topical medications were helping to decrease her pain. She was having spasms and daily numbness and tingling. Physical examination findings included crepitus with knee range of motion. The assessment references the claimant as preferring topical rather than oral medications. Lidopro and Terocin patches were being prescribed and were requested for authorization. Lidopro (capsaicin, lidocaine, menthol and methyl salicylate ointment) is a compounded topical medication. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it up, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. MTUS addresses the use of capsaicin which is recommended as an option in patients who have not responded or are intolerant to other treatments. Guidelines recommend that when prescribing medications only one medication should be given at a time. By prescribing a multiple combination medication, in addition to the increased risk of adverse side effects, it would be difficult or impossible to determine whether any derived benefit was due to a particular component. In this case, there are other single component topical treatments with generic availability that could be considered. Terocin is being prescribed with the same components which is duplicative. Lidopro is not considered medically necessary.

**Terocin patches Qty: 20.00:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics, Lidoderm (lidocaine patch).

**Decision rationale:** The claimant sustained a work injury in November 2008 when, while working as a registered nurse, she was restraining an inmate and injured her right knee. Treatments have included medications and physical therapy. An MRI of the right knee showed findings of a meniscal tear and surgery was recommended which was declined by the claimant. When seen, she was having constant knee pain rated at 6-8/10. Topical medications were helping

to decrease her pain. She was having spasms and daily numbness and tingling. Physical examination findings included crepitus with knee range of motion. The assessment references the claimant as preferring topical rather than oral medications. Lidopro and Terocin patches were being prescribed and were requested for authorization. Terocin contains methyl salicylate, capsaicin, menthol, and Lidocaine. Topical lidocaine in a formulation that does not involve a dermal-patch system can be recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy with a tricyclic or SNRI anti-depressant or an anti-epilepsy drug such as gabapentin or Lyrica. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it up, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. Guidelines address the use of capsaicin which is believed to work through a similar mechanism and is recommended as an option in patients who have not responded or are intolerant to other treatments. By prescribing a multiple combination medication, in addition to the increased risk of adverse side effects, it would be difficult or impossible to determine whether any derived benefit was due to a particular component. In this case, there are other single component topical treatments with generic availability that could be considered. Lidopro is being prescribed with the same components which is duplicative. This medication is not medically necessary.