

<b>Case Number:</b>	CM15-0004318		
<b>Date Assigned:</b>	01/15/2015	<b>Date of Injury:</b>	12/15/2008
<b>Decision Date:</b>	03/10/2015	<b>UR Denial Date:</b>	12/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/08/2015

### 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: New Jersey, Michigan, California  
 Certification(s)/Specialty: Neurology, Neuromuscular Medicine

### 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 52 year old female, who sustained an industrial injury on 12/15/08. She has reported low back and knee pain. The diagnoses have included sprain of neck, sciatica and derangement knee NOS. Treatment to date has included diagnostic studies, joint injections, and oral medications. As of the PR2 on 11/18/14, the injured worker reported pain controlled on Norco #180. The treating physician has tried to reduce this medication several times without adequate relief. The injured worker has been recommended for right sacroiliac joint injections. The treating physician is requesting to continue Docusate Sodium 100mg #45. On 12/22/14 Utilization Review non-certified a prescription for Docusate Sodium 100mg #45. The UR physician cited the US National Library of Medicine, that stool softeners are used on a short-term basis. On 1/8/15, the injured worker submitted an application for IMR for review of Docusate Sodium 100mg #45.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Docusamine Sodium 100 mg, 45 count:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation US National Library of Medicine

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Opioid induced constipation treatment. (<http://worklossdatainstitute.verioiponly.com/odgtwc/pain.htm#Opioidinducedconstipationtreatment>)

**Decision rationale:** According to ODG guidelines, docusate/sennosides is recommended as a second line treatment for opioid induced constipation. The first line measures are increasing physical activity, maintaining appropriate hydration, advising the patient to follow a diet rich in fiber, using some laxatives to stimulate gastric motility, and use of some other over the counter medications. According to the medical evaluation report dated January 2, 2015, the patient reported constipation due to taking Norco. However, there is no evidence, based on the document reviewed that first line measurements were used. Therefore the use of Docusate Sodium 100mg #45 is not medically necessary.