

Case Number:	CM15-0004432		
Date Assigned:	01/15/2015	Date of Injury:	06/27/2002
Decision Date:	03/11/2015	UR Denial Date:	01/08/2015
Priority:	Standard	Application Received:	01/09/2015

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: Arizona, California
 Certification(s)/Specialty: Family Practice

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 male, with a reported date of injury of 06/27/2002. The diagnoses include lumbar sprain/strain, lumbar neuritis, and lumbar segmental dysfunction. Treatments have included oral pain medications. A progress note on 8/27/14 indicated the claimant had 4/10 pain. Exam findings were notable for decreased range of motion of the lumbar spine and tenderness in the paraspinous region. The claimant had been on Fexmid, Tramadol, Protonix, Naprosyn and Doral. The progress report dated 11/21/2014 indicates that the injured worker continued to have chronic pain in the lower back. He rated his pain 3.5 out of 10. It was noted that the injured worker was taking his medications as prescribed, and that the medications were helping him. He was able to do more activities with the medications than without them; however, the injured worker indicated that he was having some drowsiness as a result of taking the Doral. The physical examination showed some decreased range of motion of the lumbar spine due to pain, positive lumbar tenderness and paraspinous muscle spasms, intact sensation over all dermatomes of the lower extremities, hyporeactive reflexes in the knees and ankles, and no evidence of clonus. The treating physician discontinued the Doral, but recommended to hold the Tramadol. The reason for the Tramadol was not indicated. The medical records provided for review included the urine toxicology review reports dated 11/21/2014, 10/24/2014, 09/25/2014, and 07/02/2014. The urine drug screen test collected on 10/24/2014, indicated Tramadol was detected. On 12/18/2014, Utilization Review denied the request for Tramadol 150mg #30, one (1) tablet every day, noting the increased risk of morbidity and

mortality due to the combination of benzodiazepines, antispasmodics, and opioids prescribed by a treating physician. The MTUS Chronic Pain Guidelines were cited.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 150mg QTY: 30 Take 1 QD Body Part: Blood: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, Tramadol (Ultram) Page(s): 79-80.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines opioids and Tramadol Page(s): 92-93.

Decision rationale: Tramadol is a synthetic opioid affecting the central nervous system. According to the MTUS guidelines, Tramadol is recommended on a trial basis for short-term use after there has been evidence of failure of first-line non-pharmacologic and medication options (such as acetaminophen or NSAIDs) and when there is evidence of moderate to severe pain. Although it may be a good choice in those with back pain, the had been on NSAIDs, muscle relaxants, Benzodiazepine and Tramadol. Pain response attributed to Tramadol cannot be determined. The claimant had been on Tramadol for several months which can lead to addiction and tolerance. The continued use of Tramadol as above is not medically necessary.