

Case Number:	CM15-0106503		
Date Assigned:	06/10/2015	Date of Injury:	10/02/2011
Decision Date:	07/13/2015	UR Denial Date:	05/07/2015
Priority:	Standard	Application Received:	06/02/2015

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: California

Certification(s)/Specialty: Preventive Medicine, Occupational 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 59 year old female, who sustained an industrial injury on 10/02/2011. Diagnoses include cervical disc degeneration, neck sprain/strain, cervicobrachial syndrome and chronic pain syndrome. Treatment to date has included medications including Neurontin, Butrans patch, Vistaril, Cymbalta and Lorzone, trigger point injections and modified work. Per the Primary Treating Physician's Progress Report dated 3/09/2015, the injured worker reported neck and left upper extremity pain rated as 7/10 with numbness, depression, headache and joint pain. Physical examination revealed decreased painful range of motion of the neck, flexion and extension is recorded as 60%. There were trigger points identified in the bilateral superior trapezius. The plan of care included medications and authorization was requested for Neurontin 300mg, Neurontin 800mg, Butrans patch 10mcg, Vistaril 25mcg, Cymbalta 30mg and Lorzone 750mg.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lorzone 750mg #15 with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines
Muscle Relaxants (For Pain) Section Page(s): 63-66.

Decision rationale: The MTUS Guidelines recommend the use of non-sedating muscle relaxants with caution as a second-line option for short term treatment of acute exacerbations in patients with chronic low back pain. Muscle relaxants may be effective in reducing pain and muscle tension, and increasing mobility. However, in most LBP cases, they show no benefit beyond NSAIDs in pain and overall improvement. Also there is no additional benefit shown in combination with NSAIDs. Efficacy appears to diminish over time, and prolonged use of some medications in this class may lead to dependence. Sedation is the most commonly reported adverse effect of muscle relaxant medications. These drugs should be used with caution in patients driving motor vehicles or operating heavy machinery. Drugs with the most limited published evidence in terms of clinical effectiveness include chlorzoxazone, methocarbamol, dantrolene and baclofen. Chlorzoxazone works primarily in the spinal cord and the subcortical areas of the brain. The mechanism of action is unknown but the effect is thought to be due to general depression of the central nervous system. Advantages over other muscle relaxants include reduced sedation and less evidence for abuse. Side effects include drowsiness and dizziness. In this case, Lorzone is being used for chronic pain and not an acute exacerbation. The request for Lorzone 750mg #15 with 2 refills is not medically necessary.