

Case Number:	CM15-0107607		
Date Assigned:	06/12/2015	Date of Injury:	02/01/2014
Decision Date:	07/14/2015	UR Denial Date:	05/21/2015
Priority:	Standard	Application Received:	06/04/2015

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: Pennsylvania
 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 51-year-old female who reported an industrial injury on 2/1/2014. Her diagnoses, and/or impressions, are noted to include reflex sympathetic dystrophy (RSD) of upper limb; and carpal tunnel syndrome, status-post right carpal tunnel release. No current imaging studies are noted. Her treatments have included medication management with failed/un-tolerated medications, with the exploration of different pain management options; and rest from work. The pain management progress notes of 5/14/2015 reported a follow-up visit for medication refills, and that she stated that Dendracin cream had been extremely beneficial, for her painful RSD, which allowed her to maintain functionality with activities of daily living, without the systemic effects. She reported the desire to return to work but could not function at the level she used to. Objective findings were noted to include the inability to heel-and-toe walk; the demonstration of major postural abnormalities; neck upper extremity guarding; decreased strength in the right upper extremity; decreased sensation of the left upper extremity; increased sensitivity to the right hand; decreased deep tendon reflexes in the triceps, bilateral biceps and brachioradialis; allodynia; hyperpathia; "S to PP"; and reddish discoloration to the right hand/forearm. The physician's requests for treatments were noted to include the continuation of Dendracin topical analgesic cream for painful RSD.

IMR ISSUES, DECISIONS AND RATIONALES

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

Dendracin topical analgesic cream, #3: Overturned

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate topicals; Topical Analgesics Page(s): 105, 111.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Topical salicylates Page(s): 105 and 111-113.

Decision rationale: This worker has been applying Dendracin lotion for pain associated with RSD and has found it extremely helpful. Dendracin lotion is a topical analgesic consisting of methyl salicylate, benzocaine, and menthol. According to the MTUS chronic pain guidelines, methyl salicylate is recommended. Menthol is not specifically listed in the MTUS but is a product in BenGay that is specifically discussed under topical salicylates. Benzocaine is not specifically listed in the MTUS but is similar to lidocaine. Topical lidocaine is recommended for neuropathic pain after there has been a trial of a first line therapy with tricyclic, SNRI, or an AED. Lidocaine is not recommended for non-neuropathic pain. This worker has been taking gabapentin as a first line therapy for the RSD. Given that RSD can be considered neuropathic pain, the worker is already taking a first line agent and is finding the medication extremely helpful, it is reasonable and medically necessary to continue it.