

<b>Case Number:</b>	CM15-0130040		
<b>Date Assigned:</b>	07/16/2015	<b>Date of Injury:</b>	07/04/2011
<b>Decision Date:</b>	08/18/2015	<b>UR Denial Date:</b>	06/11/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/07/2015

### 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, Massachusetts  
 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 38-year-old male, who sustained an industrial injury on 7/04/2011. He reported injury to the low back. Diagnoses include lumbar sprain/strain, disc herniation, radiculitis, sacroiliitis, cervical sprain and chronic pain. Treatments to date include activity modification, physical therapy, chiropractic therapy, acupuncture treatments, and medications. The medical records indicated that he couldn't tolerate medications to prevent gastric ulcer. Currently, he complained of low back pain with radiation to bilateral lower extremities associated with numbness and tingling. Pain was rated 9/10 VAS. Bilateral transforaminal lumbar epidural steroid injection provided on 4/1/15 was noted to provide 50% improvement. On 5/27/15, the physical examination documented positive Gaenslen's test and Patrick Fabre test and positive sacroiliac joint thrust. The plan of care included prescriptions for a topical compound cream; Flurbiprofen 25%/ Capsaicin 0.025% in Lipoderm Base 180 grams; Gabapentin 10%/ Ketoprofen 10%; Tramadol 5%/ Cyclobenzaprine 2% in Lipoderm Base 180 grams; and Terocin Patch #30.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Flurbiprofen 25% Capsaicin 0.025% in Lipoderm base 180gm: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesic. Pg 112-119Lidoderm Patch. Pg. 56-57.

**Decision rationale:** MTUS guidelines state that topical NSAIDs, "The efficacy in clinical trial for this treatment has been inconsistent and most studies are small... having been shown to be superior to placebo during the first 2 weeks of treatment for osteoarthritis, but not afterward." According to MTUS guidelines: "Lidoderm is the brand name for a lidocaine patch produced by Endo Pharmaceuticals. Topical lidocaine may be recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (tri-cyclic or SNRI anti-depressants or an AED such as gabapentin or Lyrica). This is not a first-line treatment and is only FDA approved for post-herpetic neuralgia. Further research is needed to recommend this treatment for chronic neuropathic pain disorders other than post-herpetic neuralgia." From my review of the records, there is no mention of trial of an appropriate first-line therapy such as Gabapentin or Lyrica, consequently Lidocaine patch is not clinically indicated at this time. This request is not medically necessary.

**Gabapentin 10% Ketoprofen 10% Tramadol 5% Cyclobenzaprine 2% Lipoderm base 180gm: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesic Page(s): 112-119.

**Decision rationale:** According to CA MTUS guidelines topical analgesics are largely experimental and are only indicated once first line oral agent for radicular pain such as Lyrica or Neurontin are shown to be ineffective and if the compounded agents are contraindicated in traditional oral route. There is nothing noted in the provided clinic record that the injured worker is unable to take a first line oral agent for his neuropathic pain. Additionally any compounded product that contains at least one drug that is not recommended is not recommended. Cyclobenzaprine and Gabapentin are not recommended as a compounded agent as it can be safely taken orally. Consequently, continued use of the above listed compounded agent is not supported at this time. This request is not medically necessary.

**Terocin Patch #30: Upheld**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Lidocaine Patch Page(s): 56-57.

**Decision rationale:** Tercoin Patch is a topical application of lidocaine and menthol. According to MTUS guidelines: "Topical lidocaine may be recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (tri-cyclic or SNRI anti-depressants or an AED such as gabapentin or Lyrica). This is not a first-line treatment and is only FDA approved for post-herpetic neuralgia. Further research is needed to recommend this treatment for chronic neuropathic pain disorders other than post-herpetic neuralgia." From my review of the records, there is no mention of trial of an appropriate first-line therapy such as Gabapentin or Lyrica, consequently Lidocaine patch is not clinically indicated at this time. This request is not medically necessary.