

Case Number:	CM15-0135609		
Date Assigned:	07/23/2015	Date of Injury:	10/17/2014
Decision Date:	08/20/2015	UR Denial Date:	06/24/2015
Priority:	Standard	Application Received:	07/14/2015

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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

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 57-year-old male with an industrial injury dated 10/17/2014. The injured worker's diagnoses include status post amputation tip of right long finger distal to dip joint , right hand fracture and right hand tenosynovitis. Treatment consisted of prescribed medications and periodic follow up visits. In a progress note dated 05/05/2015, the injured worker reported constant moderate achy, throbbing right hand pain with numbness, tingling sensation, weakness and loss of grip. The injured worker rated pain a 9/10. Objective findings revealed amputated tip of right long finger distal to dip joint and tenderness to palpitation of the palmar aspect of the right hand. The treating physician prescribed HMPHCC2 - Flurbiprofen 20%/Baclofen 5% Camphor 2%/Menthol 2%/Dexamethasone Micro 0.2% Capsaicin 0.025%/Hyaluronic acid 0.2% in cream base and a prescription for HCPC1 - Amitriptyline HCL 10%/Gabapentin 10%/ Bupivacaine HCL 5%/Hyaluronic acid 0.2% in cream base 240 grams, now under review.

IMR ISSUES, DECISIONS AND RATIONALES

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

HMPHCC2 - Flurbiprofen 20%/Baclofen 5% Camphor 2%/Menthol 2%/Dexamethasone Micro 0.2% Capsaicin 0.025%/Hyaluronic acid 0.2% in cream base: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Medications for chronic pain, p60 (2) Topical Analgesics, p111-113 Page(s): 60, 111-113.

Decision rationale: The claimant sustained a work-related injury in October 2014 resulting in a right third finger amputation distal to the DIP joint. He continues to be treated for chronic pain. No medications were being prescribed in March 2015. When seen, there was numbness and tingling. There was decreased grip strength. In addition, tenderness. Authorization for topical compounded creams is being requested. This request is for a compounded topical medication with components including, Flurbiprofen, baclofen, and dexamethasone. Compounded topical preparations of flurbiprofen are used off-label (non-FDA approved) and have not been shown to be superior to commercially available topical medications such as diclofenac. Additionally, another anti-inflammatory medication, dexamethasone, is included. Baclofen is a muscle relaxant and there is no evidence for the use of any muscle relaxant as a topical product. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. By prescribing a compounded medication, in addition to increased risk of adverse side effects, it is not possible to determine whether any derived benefit is due to a particular component. In this case, other single component topical treatments could be considered. Additionally, in this case, two topical anti-inflammatory medications are included in this product, which is duplicative. This medication was not medically necessary.

HCPC1 - Amitriptyline HCL 10%/Gabapentin 10%/Bupivacaine HCL 5%/Hyaluronic acid 0.2% in cream base 240 grams: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines (1) Medications for chronic pain, p60 (2) Topical Analgesics, p111-113 Page(s): 60, 111-113.

Decision rationale: The claimant sustained a work-related injury in October 2014 resulting in a right third finger amputation distal to the DIP joint. He continues to be treated for chronic pain. No medications were being prescribed in March 2015. When seen, there was numbness and tingling. There was decreased grip strength. In addition, tenderness. Authorization for topical compounded creams is being requested. Oral Gabapentin has been shown to be effective in the treatment of painful diabetic neuropathy and post herpetic neuralgia and has been considered as a first-line treatment for neuropathic pain. Its use as a topical product is not recommended. Many agents are compounded as monotherapy or in combination for pain control such as opioids antidepressants, glutamate receptor antagonists, alpha-adrenergic receptor agonists, adenosine, cannabinoids, cholinergic receptor agonists, GABA agonists, prostanoids, bradykinin, adenosine triphosphate, biogenic amines, and nerve growth factor. There is little to no research to support the use of many these agents including amitriptyline. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. By prescribing a compounded medication, in addition to increased risk of adverse side effects, it is not possible to determine whether any derived benefit is due to a particular component. In this case, other single component topical treatments could be considered. Guidelines also recommend that when prescribing medications only one medication should be given at a time. This medication was not medically necessary.