

<b>Case Number:</b>	CM15-0138531		
<b>Date Assigned:</b>	07/29/2015	<b>Date of Injury:</b>	02/11/2014
<b>Decision Date:</b>	09/24/2015	<b>UR Denial Date:</b>	06/18/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/16/2015

### 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: Texas, 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:

This is a 48 year old female patient, who sustained an industrial injury on 2/11/14. The diagnoses include adhesive capsulitis, status post right shoulder surgery, left shoulder compensatory and right carpal tunnel syndrome. Per the doctor's note dated 6/4/15, she had complains of numbness in hand with pain and stiffness of the shoulder. She would like to taper down on oral medication and has requested a topical cream. She noted acupuncture was not improving the symptoms. Physical examination revealed restricted range of motion of the shoulder; positive Tinel's and Phalen's test on the right. The medications list includes Norco and Mobic. She has had (EMG) Electromyogram studies dated 4/14/15 which revealed entrapment neuropathy of the median nerve at the right wrist with mild to moderate slowing of nerve conduction (carpal tunnel syndrome). She has undergone right shoulder surgery on 9/26/2014. She has had acupuncture, physical therapy, activity restrictions and home exercise program. The treatment plan included proceeding with right carpal tunnel release, acupuncture and follow up appointment. A request for authorization was submitted on 6/11/15 for Voltaren gel 1%.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Voltaren gel:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter: Pain (updated 09/08/15) Voltaren® Gel (Diclofenac).

**Decision rationale:** The cited Guidelines regarding topical analgesics state: "Largely experimental in use with few randomized controlled trials to determine efficacy or safety, primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed." Any intolerance or contraindication to oral medications is not specified in the records provided. The cited guidelines recommend topical analgesics for neuropathic pain only when trials of antidepressants and anticonvulsants have failed to relieve symptoms. Failure to antidepressants and anticonvulsants is not specified in the records provided. In addition, per the ODG cited above, Voltaren gel is "Not recommended as a first-line treatment. See Diclofenac Sodium (Voltaren), where Voltaren Gel is recommended for osteoarthritis after failure of an oral NSAID, or contraindications to oral NSAIDs, or for patients who cannot swallow solid oral dosage forms, and after considering the increased risk profile with Diclofenac, including topical formulations." The request for Voltaren gel is not medically necessary.