

Case Number:	CM15-0141878		
Date Assigned:	07/31/2015	Date of Injury:	05/20/2013
Decision Date:	08/28/2015	UR Denial Date:	06/18/2015
Priority:	Standard	Application Received:	07/21/2015

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: Arizona, 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:

The injured worker (IW) is a 52-year-old female who sustained an industrial injury on 05-20-2013. Diagnoses include left elbow sprain/strain; left carpal tunnel syndrome; left wrist internal derangement; and left hand tenosynovitis. Treatment to date has included medications, physical and occupational therapy, chiropractic therapy, paraffin wax and splinting. According to the PR2 dated 6-10-2015, the IW reported constant pain in the left elbow, left wrist and left hand. On examination, motor strength was 5+ out of 5 bilaterally in the upper and lower extremities. Deep tendon reflexes were normal and equal bilaterally at 2 out of 2. Ranges of motion were normal and no bruising, swelling, atrophy or lesion was present at the left elbow, wrist or hand. There was tenderness to palpation about the elbow and muscle spasms in the dorsal and volar forearm. Valgus and Tinel's was negative. The left wrist and palm were also tender, with positive Tinel's and Phalen's signs; carpal compression and Finkelstein's were negative. An MRI of the left wrist dated 8-21-2013 showed a mild subluxation at the distal radioulnar joint with slight irregularity in the triangular fibrocartilage complex and a small amount of fluid in the distal radioulnar joint with a small cyst in the lunate. Electrodiagnostic testing of the left upper extremity on 10-24-2013 was normal and testing on the right was normal, as well, on 3-10-2014. A request was made for Amitriptyline HCl 10%-Gabapentin 10%-Bupivacaine HCl 5%-Hyaluronic acid 0.2% cream for pain in the left elbow, wrist and hand without narcotic medication.

IMR ISSUES, DECISIONS AND RATIONALES

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

Amitriptyline Hydrochloride 10%/Gabapentin 10%/ Bupivacaine Hydrochloride 5%/ Hyaluronic Acid 0.2% Cream: 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): 111-112.

Decision rationale: According to the MTUS guidelines, topical analgesics are recommended as an option as indicated below. They are 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 compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. Topical Gabapentin and antidepressants such as Amitriptyline is not recommended due to lack of evidence. In addition, the claimant had used other topical and oral analgesics. Prolonged use of multiple topical analgesics is not recommended. Since the compound above contains these topical medications, the compound in question is not medically necessary.