

<b>Case Number:</b>	CM15-0142437		
<b>Date Assigned:</b>	08/03/2015	<b>Date of Injury:</b>	08/26/2013
<b>Decision Date:</b>	08/31/2015	<b>UR Denial Date:</b>	06/24/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/22/2015

### 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  
 Certification(s)/Specialty: Emergency 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(n) 56 year old male, who sustained an industrial injury on 8-26-13. He reported pain in his lower back. The injured worker was diagnosed as having lumbar degenerative disc disease, lumbar herniated nucleus pulposus and sacroiliac syndrome. Treatment to date has included physical therapy, chiropractic treatments, and acupuncture x 8 sessions with relief, Celebrex and Flexeril since at least 4-15-15. As of the PR2 dated 6-17-15, the injured worker reports mild to moderate low back pain that is worse with activity and better with rest. He indicated that the Celebrex is relieving his pain better than the Ibuprofen and he has less drowsiness with the 5mg Flexeril versus the 10mg Flexeril. Objective findings include tenderness over the left quadratus lumborum and posterior superior iliac spine area. The treating physician requested Celebrex, Flexeril and acupuncture x 12 sessions.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Celebrex, dosage and quantity unspecified:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Non Steroidal Anti Inflammatory Drugs.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines, Anti-inflammatory medications Page(s): 22.

**Decision rationale:** The requested Celebrex, dosage and quantity unspecified is not medically necessary. California's Division of Worker's Compensation "Medical Treatment Utilization Schedule" (MTUS), Chronic Pain Medical Treatment Guidelines, Pg. 22, Anti-inflammatory medications note "For specific recommendations, see NSAIDs (non-steroidal anti-inflammatory drugs). Anti-inflammatories are the traditional first line of treatment, to reduce pain so activity and functional restoration can resume, but long-term use may not be warranted". The injured worker has mild to moderate low back pain that is worse with activity and better with rest. He indicated that the Celebrex is relieving his pain better than the Ibuprofen and he has less drowsiness with the 5mg Flexeril versus the 10mg Flexeril. Objective findings include tenderness over the left quadratus lumborum and posterior superior iliac spine area. However the treating physician has not documented the requested dosage, quantity or hepatorenal lab tests. The criteria noted above, not having been met Celebrex, dosage and quantity unspecified is not medically necessary.

**Flexeril, dosage quantity and unspecified:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxants.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxants, Page(s): 63-66.

**Decision rationale:** The requested Flexeril, dosage quantity and unspecified is not medically necessary. CA MTUS Chronic Pain Treatment Guidelines, Muscle Relaxants, Page 63-66, do not recommend muscle relaxants as more efficacious than NSAID's and do not recommend use of muscle relaxants beyond the acute phase of treatment. The injured worker has mild to moderate low back pain that is worse with activity and better with rest. He indicated that the Celebrex is relieving his pain better than the Ibuprofen and he has less drowsiness with the 5mg Flexeril versus the 10mg Flexeril. Objective findings include tenderness over the left quadratus lumborum and posterior superior iliac spine area. The treating physician has not documented duration of treatment, spasticity or hypertonicity on exam, intolerance to NSAID treatment, nor objective evidence of derived functional improvement from its previous use. The criteria noted above not having been met, Flexeril, dosage quantity and unspecified is not medically necessary.

**Acupuncture 12 sessions:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Acupuncture Treatment Guidelines.

**Decision rationale:** The requested Acupuncture 12 sessions, is not medically necessary. CA MTUS Acupuncture Guidelines recommend note that in general acupuncture "may be used as an adjunct to physical rehabilitation". The injured worker has mild to moderate low back pain

that is worse with activity and better with rest. He indicated that the Celebrex is relieving his pain better than the Ibuprofen and he has less drowsiness with the 5mg Flexeril versus the 10mg Flexeril. Objective findings include tenderness over the left quadratus lumborum and posterior superior iliac spine area. The treating physician has not documented objective evidence of derived functional benefit from completed acupuncture sessions, such as improvements in activities of daily living or reduced work restrictions or decreased reliance on medical intervention. The criteria noted above, not having been met Acupuncture 12 sessions is not medically necessary.