

<b>Case Number:</b>	CM15-0146045		
<b>Date Assigned:</b>	08/06/2015	<b>Date of Injury:</b>	07/07/2012
<b>Decision Date:</b>	09/03/2015	<b>UR Denial Date:</b>	07/15/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/27/2015

### 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: Connecticut, California, Virginia  
 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 60 year old male, who sustained an industrial injury on 7-7-2012. The mechanism of injury is unknown. The injured worker was diagnosed as having cervical sprain-strain, cervical 5-6 disc protrusion with severe spinal stenosis and right upper extremity radiculopathy. There is no record of a recent diagnostic study. Treatment to date has included therapy and medication management. In a progress note dated 7-1-2015, the injured worker complains of pain in the neck that radiates to the shoulders. Physical examination showed decreased range of motion and strength and spasticity. The treating physician is requesting plasma replacement and Anaprox 550 mg #60.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Plasma Replacement, QTY: 1:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Low Back Chapter.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) low back, platelet rich plasma.

**Decision rationale:** The MTUS does not address the use of platelet rich plasma in treating chronic neck and upper back pain, however the ODG does address the use of PRP in back pain. The ODG states that PRP is not recommended as the results in spine surgery are limited and controversial. Because there is not yet clear evidence based value to use of platelet rich plasma as a treatment modality per the guidelines, the request cannot be considered medically necessary at this time.

**Anaprox 550mg, QTY 60:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs) Page(s): 67-73.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDS Page(s): 73.

**Decision rationale:** The MTUS provides a recommendation of use of Anaprox. The provided documents indicate use of Anaprox as an anti-inflammatory and analgesic, which is medically appropriate given the patient's history of pain. The Utilization Review indicates that the Anaprox was not warranted for prolonged use based on the provided clinical notes. It is the opinion of this reviewer, therefore, that the BID dosing of Anaprox is appropriate, and given the patient's history can be considered medically necessary. Of note, if increased dosing is requested, or the dosing schedule is changed as part of clinical decision-making, careful documentation and time limitations should be set along with a plan for close follow up and monitoring for harmful effects.