

<b>Case Number:</b>	CM15-0147802		
<b>Date Assigned:</b>	08/10/2015	<b>Date of Injury:</b>	01/25/2013
<b>Decision Date:</b>	09/08/2015	<b>UR Denial Date:</b>	07/18/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/29/2015

### 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, Indiana, New York  
 Certification(s)/Specialty: Internal 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 (IW) is a 55-year-old female who sustained an industrial injury on 01-25-2013. Diagnoses include right carpal tunnel syndrome; DeQuervain's tenosynovitis, left hand; and repetitive strain injury. Treatment to date has included medications, acupuncture and occupational therapy (OT). According to the PR4 dated 4-28-2015, the IW reported intermittent pain in the left hand and wrist with intermittent numbness and tingling, aggravated by prolonged periods of typing. She rated her pain 6 out of 10. Electromyography performed on 3-20-2014 found evidence of mild right carpal tunnel syndrome. On examination, range of motion of the bilateral wrists was normal. Sensation was intact to the wrists and forearms. There was tenderness present in the bilateral forearms and a high frequency resting tremor in the right hand. Finkelstein's test was positive in the left wrist; Tinel's sign was positive on the right; and Phalen's test was negative bilaterally. Hand grip was 16 -16 -12 (kg) on the right and 18 - 14 - 12 (kg) on the left. A request was made for Pyridoxine tablets 50mg for nerve health.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Pyridoxine Tablets 50mg (quantity unspecified): Upheld**

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS.

Decision based on Non-MTUS Citation

<https://www.nlm.nih.gov/medlineplus/druginfo/meds/a682587.html>.

**Decision rationale:** Pursuant to Medline plus, pyridoxine 50 mg (quantity unspecified) is not medically necessary. Pyridoxine, vitamin B6, is required by your body for utilization of energy in the foods you eat, production of red blood cells, and proper functioning of nerves. It is used to treat and prevent vitamin B6 deficiency resulting from poor diet, certain medications, and some medical conditions. In this case, the injured worker's working diagnoses are right carpal tunnel syndrome; DeQuervain's tenosynovitis; and repetitive strain injury. Date of injury is January 25, 2013. Request for authorization is dated July 9, 2015. The most recent progress note in the 51 page medical record is dated April 28, 2015. The injured worker subjectively complains of 6/10 left hand pain and wrist pain with numbness and tingling. Objectively, the physical examination is grossly normal. The treatment plan states continue B6 for nerve health. There are no laboratory results of the medical record. There is no clinical documentation of the vitamins B6 deficiency. There is no clinical rationale for continuing Pyridoxine 50 mg. Additionally, there is no quantity specified. Based on clinical information the medical record and the peer-reviewed evidence-based guidelines, pyridoxine 50 mg (quantity unspecified) is not medically necessary.