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| <b>Case Number:</b>   | CM15-0162254 |                              |            |
| <b>Date Assigned:</b> | 08/28/2015   | <b>Date of Injury:</b>       | 03/31/2009 |
| <b>Decision Date:</b> | 10/29/2015   | <b>UR Denial Date:</b>       | 07/31/2015 |
| <b>Priority:</b>      | Standard     | <b>Application Received:</b> | 08/18/2015 |

### 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:

The 58 year old male injured worker suffered an industrial injury on 3-31-2009. The diagnoses included cervical discopathy, bilateral carpal tunnel syndrome, left shoulder impingement, and lumbar fusion. On 6-1-2015, the treating provider reported constant cervical pain with radiation to the upper extremities. There are associated headaches that are migrainous in nature as well as tension between the shoulder blades. The pain was rated 8 out of 10. On exam, the cervical spine had muscle tenderness with spasms. It was not clear if the injured worker had returned to work. The requested treatments included Sumatriptan Succinate. The medication list includes Tramadol, Sumatriptan, Cyclobenzaprine, Nabumatone. The patient sustained the injury due to cumulative trauma. The patient has had MRI of the bilateral wrist that revealed CTS and MRI of the shoulder that revealed rotator cuff tear. The patient's surgical history includes shoulder arthroscopy, lumbar fusion, and knee arthroscopy, left foot and ankle surgery. Per the note dated 6/19/15, the patient had complaints of pain in cervical region with radiculopathy in upper extremity and migrainous headache. Physical examination of the cervical spine revealed tenderness on palpation, positive axial loading and Spurling test, limited range of motion and tingling and numbness in upper extremity.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Sumatriptan Succinate 25mg, 2 to be taken, 1 at onset of headache and repeat 2 hours later, if needed, no more than 4 a day count #9:** 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), Treatment Index, 13th Edition (Web), 2015, Head - Imitrex (Sumatriptan).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Chapter : Head (updated 07/24/15) Triptans and Other Medical Treatment Guidelines Thompson Micromedex-FDA Labeled indications; Drug-Imitrex Migraine, acute, With or without aura.

**Decision rationale:** Request: Sumatriptan Succinate 25mg, 2 to be taken; 1 at onset of headache and repeat 2 hours later, if needed. Sumatriptan is used to treat migraine headaches in adults, with or without aura. MTUS guideline does not specifically address this issue. Hence ODG and Thompson Micromedex used. Thompson Micromedex-FDA Labeled indications of drug- Sumatriptan includes Migraine, acute, with or without aura. A detailed history and physical examination related to headache was not specified in the records provided. The dose, duration and response to other medications for acute migraine are not specified in the records provided. A detailed neurological examination is not specified in the records provided. The report of an imaging study to evaluate the headache is not specified in the records provided. The medical necessity of the request for Sumatriptan Succinate 25mg, 2 to be taken, 1 at onset of headache and repeat 2 hours later, if needed, is not fully established in this patient at this time, given the medical records provided and the cited guidelines. Therefore, the request is not medically necessary.