

Case Number:	CM15-0169483		
Date Assigned:	09/10/2015	Date of Injury:	09/12/2011
Decision Date:	10/07/2015	UR Denial Date:	08/04/2015
Priority:	Standard	Application Received:	08/28/2015

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 is a 36 year old female, who sustained an industrial-work injury on 9-12-11. He reported initial complaints of right foot pain. The injured worker was diagnosed as having joint stiffness, status post right great toe amputation with residual symptoms, and lumbosacral pain. Treatment to date has included medication, surgery right great toe amputation on 5-14-13, left S1 joint injection), physical therapy. Currently, the injured worker complains of right foot pain. Therapies reported to benefit the foot. Per the primary physician's progress report (PR-2) on 7-24-15, exam noted left MTP joint tenderness to touch with rigidity and decreased range of motion, positive Tinel's sign on tarsal tunnel area of right foot. Current plan of care includes medication for neuropathic pain, podiatry follow up, additional therapy (completed 8 sessions), and return visit. The Request for Authorization date was 7-29-15 and requested service included Flurbiprofen 10%, Capsaicin 0.05%, Menthol 5%, and Camphor 5% 180 grams. The Utilization Review on 8-4-15 denied the request due to lack of support (research) in the use of these agents for neuropathic pain. Additionally, use of one compound medication that is not supported for topical application is therefore not recommended. Oral Gabapentin was also requested for neuropathic pain symptoms.

IMR ISSUES, DECISIONS AND RATIONALES

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

Flurbiprofen 10%, Capsaicin 0.05%, Menthol 5%, Camphor 5% 180 grams: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics.

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. Flurbiprofen is a topical NSAID. It is indicated for relief of osteoarthritis pain in joints that lend themselves to topical treatment (ankle, elbow, foot, hand, knee, and wrist). It has not been evaluated for treatment of the spine, hip or shoulder. It is recommended for short-term use (4-12 weeks) for arthritis. In this case, the claimant does not have arthritis and long term use is not indicated. There are diminishing effects after 2 weeks. Capsaicin is recommended in doses under .025%. An increase over this amount has not been shown to be beneficial. In this case, the claimant remained on oral NSAIDS while on the above medication. Topical NSAIDS can reach systemic levels similar to oral NSAIDS. Since the compound above contains these topical medications, the Flurbiprofen 10%, Capsaicin 0.05%, Menthol 5%, Camphor 5% is not medically necessary.