

Case Number:	CM15-0209651		
Date Assigned:	10/28/2015	Date of Injury:	11/04/2014
Decision Date:	12/15/2015	UR Denial Date:	10/20/2015
Priority:	Standard	Application Received:	10/26/2015

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, District of Columbia, Maryland
 Certification(s)/Specialty: Anesthesiology, Pain Management

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 68 year old male with an industrial injury date of 11-04-2014. Medical record review indicates he is being treated for status post left ankle contusion, rule out Achilles tendinitis and rule out ankle tendon. Subjective complaints (10-06-2015) included "feels like electric shock going around the ankle." The injured worker noted that "while I take the medications pain calms down." Work status was to return to modified duties as of 10-06-2015. Medications included Fenoprofen (since at least 04-07-2015.) Other medications included Motrin (05-07-2015.) Prior treatment included referral to podiatrist, continue plantar flexion and dorsiflexion exercises and medications. Objective findings (10-06-2015) included bruising on medial side of the left lower leg superior as well as the posterior side of the left ankle. There were some varicose veins 'available. There was tenderness in the Achilles tendon, "somewhat" trigger areas on deep palpation posterior to the medial malleoli and some tightness of the Achilles tendon. On 10-20-2015 the request for Fenoprofen 400 mg quantity of 60 for 30 days' supply was non-certified by utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Fenoprofen 400mg quantity 60 for 30 days supply: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs (non-steroidal anti-inflammatory drugs).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): NSAIDs (non-steroidal anti-inflammatory drugs).

Decision rationale: With regard to the use of NSAIDs for chronic low back pain, the MTUS CPMTG states "Recommended as an option for short-term symptomatic relief. A Cochrane review of the literature on drug relief for low back pain (LBP) suggested that NSAIDs were no more effective than other drugs such as acetaminophen, narcotic analgesics, and muscle relaxants. The review also found that NSAIDs had more adverse effects than placebo and acetaminophen but fewer effects than muscle relaxants and narcotic analgesics. In addition, evidence from the review suggested that no one NSAID, including COX-2 inhibitors, was clearly more effective than another." "Low back pain (chronic): Both acetaminophen and NSAIDs have been recommended as first line therapy for low back pain. There is insufficient evidence to recommend one medication over the other. Selection should be made on a case-by-case basis based on weighing efficacy vs. side effect profile." The documentation submitted for review indicates that the injured worker has been using this medication since at least 4/2015. As it is only recommended for short-term symptomatic relief, the request is not medically necessary.