

<b>Case Number:</b>	CM15-0027449		
<b>Date Assigned:</b>	02/20/2015	<b>Date of Injury:</b>	02/18/2014
<b>Decision Date:</b>	03/31/2015	<b>UR Denial Date:</b>	01/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/13/2015

### 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: New Jersey

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:

This 32 year old male sustained a work related injury on 02/18/2014. According to a progress report dated 12/22/2014 the injured worker continued to have some back pain. The pain that had been radiating down the legs was improved. He had no new complaints. Physical examination of the spine revealed no obvious deformity. There was no tenderness to palpation. Motor was 5/5 throughout bilateral upper extremities and lower extremities. Sensation was intact to light touch. There was no Hoffmann's and no clonus. All fingers and toes were warm and well perfused. Muscle strength in the upper extremities and lower extremities was 5/5. The injured worker was given a prescription of Tramadol. The injured worker was currently working full-time full-duty. On 01/12/2015, Utilization Review non-certified Tramadol 50 mg twice a day #60 refill: 1. According to the Utilization Review physician, there was no documentation that the prescriptions were from a single practitioner and were taken as directed and that the lowest possible dose was being used. CA MTUS Chronic Pain Medical Treatment Guidelines were referenced. The decision was appealed for an Independent Medical Review.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Tramadol 50mg twice a day #60 refill: 1:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 76-78, 93, 94.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 78-96.

**Decision rationale:** The MTUS Chronic Pain Guidelines state that for a therapeutic trial of opioids, there needs to be no other reasonable alternatives to treatments that haven't already been tried, there should be a likelihood that the patient would improve with its use, and there should be no likelihood of abuse or adverse outcome. Before initiating therapy with opioids, the MTUS Chronic Pain Guidelines state that there should be an attempt to determine if the pain is nociceptive or neuropathic (opioids not first-line therapy for neuropathic pain), the patient should have tried and failed non-opioid analgesics, goals with use should be set, baseline pain and functional assessments should be made (social, psychological, daily, and work activities), the patient should have at least one physical and psychosocial assessment by the treating doctor, and a discussion should be had between the treating physician and the patient about the risks and benefits of using opioids. Initiating with a short-acting opioid one at a time is recommended for intermittent pain, and continuous pain is recommended to be treated by an extended release opioid. Only one drug should be changed at a time, and prophylactic treatment of constipation should be initiated. In the case of this worker, there was insufficient evidence found in the documentation that the criteria for starting tramadol was met, or the required preparation and education related to its use. There was no report of a psychosocial assessment, no discussion of the risks and benefits and goals of using tramadol, and no baseline functional assessment was performed. Therefore, the tramadol will be considered medically unnecessary.