

<b>Case Number:</b>	CM15-0216336		
<b>Date Assigned:</b>	11/06/2015	<b>Date of Injury:</b>	04/03/2007
<b>Decision Date:</b>	12/24/2015	<b>UR Denial Date:</b>	10/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/03/2015

### 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, New York, California  
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented [REDACTED] beneficiary who has filed a claim for gastroesophageal reflux disease, constipation, and obstructive sleep apnea reportedly associated with an industrial injury of April 3, 2007. In a Utilization Review report dated October 12, 2015, the claims administrator failed to approve a request for Gaviscon. The claims administrator did, however, approve requests for Prilosec and Zantac. The claims administrator referenced a September 28, 2015 office visit in its determination. The applicant's attorney subsequently appealed. On August 12, 2015, the applicant reported ongoing issues with gastroesophageal reflux disease, reportedly NSAID-induced. The applicant had ancillary issues with constipation, obstructive sleep apnea, hypertension, and diabetes, the treating provider reported. Prilosec, Zantac, Gaviscon, Citracal, and probiotics were all seemingly endorsed. The attending provider contended that the applicant's diabetes was in a better control. Worsening reflux was seemingly reported on this date.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Gaviscon 1 bottle x2:** Overturned

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.drugs.com.mtm/gaviscon-extra-strength.html>.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Nonprescription medications, NSAIDs, GI symptoms & cardiovascular risk, NSAIDs, specific drug list & adverse effects. Decision based on Non-MTUS Citation <http://reference.medscape.com/drug/gaviscon-extra-strength-tablets-gaviscon-extra-strength-liquid-aluminum-hydroxide-magnesium-carbonate-999661>.

**Decision rationale:** Yes, the request for Gaviscon, an antacid, was medically necessary, medically appropriate, and indicated here. As noted on page 72 of the MTUS Chronic Pain Medical Treatment Guidelines, certain NSAIDs, such as Indocin, can be employed in conjunction with antacids. Page 69 of the MTUS Chronic Pain Medical Treatment Guidelines also notes that proton pump inhibitors, H2 antagonists, and, by implication, the Gaviscon at issue here, are indicated in the treatment of NSAID-induced dyspepsia, or, by analogy, the stand-alone dyspepsia reportedly present here. Page 67 of the MTUS Chronic Pain Medical Treatment Guidelines notes that non-prescription medications are deemed recommended. Medscape notes that Gaviscon, an antacid, is indicated in the treatment of heartburn, i.e., the diagnosis reportedly present here, on August 12, 2015. Usage of Gaviscon was indicated, given worsening symptoms of reflux reported on that date, the favorable Medscape position on antacids for heartburn and the favorable MTUS position on non-prescription medications. Therefore, the request was medically necessary.