

Case Number:	CM15-0219202		
Date Assigned:	11/12/2015	Date of Injury:	08/16/2013
Decision Date:	12/24/2015	UR Denial Date:	10/22/2015
Priority:	Standard	Application Received:	11/06/2015

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:

The injured worker is a 47 year old female who sustained an industrial injury on August 16, 2013. Medical records indicated that the injured worker was treated for bilateral upper extremity pain. Medical diagnoses include carpal tunnel syndrome, unspecified upper limb. In the provider notes dated October 14, 2015 the injures worker complained of bilateral upper extremity pain. "She states the pain affects her mood and she feels depressed." She has completed physical therapy "with no lasting improvement." She states that wrist pain is worsening. She states that writing causes her hand to cramp. She rates her pain 4-6 on the pain scale. She states that the use of Salon Pas patches help with burning and sharp pain and Gabapentin helps with sleep. "She feels very depressed, she denies any thoughts of wanting to hurt herself." On exam, the documentation stated positive Phalen's test of the right wrist and tenderness to palpation of the left wrist. The treatment plan is for medication refills. A Request for Authorization was submitted for Neurontin 300 mg #60 and Cymbalta 20 mg #30. The Utilization Review dated October 22, 2015 denied the request for Neurontin 300 mg #60 and Cymbalta 20 mg #30.

IMR ISSUES, DECISIONS AND RATIONALES

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

Salonpas #5: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Salicylate topicals. Decision based on Non-MTUS Citation Topp R1, et. al., The effect of either topical menthol or a placebo on functioning and knee pain among patients with knee OA., J Geriatr Phys Ther. 2013 Apr-Jun; 36 (2): 92-9. doi: 10.1519/JPT.0b013e318268dde1.

Decision rationale: The MTUS Chronic Pain Treatment Guidelines state that topical salicylates, such as methyl salicylate, are significantly better than placebo in chronic pain and are recommended, considering their low risk. However, in order to justify continuation chronically, there needs to be evidence of functional benefit. The MTUS and ODG do not specifically address topical menthol use, however, they consider all topical analgesics somewhat experimental due to limited quality studies to show effectiveness and safety. Topical use of menthol, however, is very safe and has some evidence to show that it is effective at both reducing pain as well as increasing function with chronic pain. At least a trial of topical menthol may be indicated, however, in order to justify continuation a clear documentation of pain reduction and functional improvement with its use is required. In the case of this worker, the provider prescribed Salonpas (methylsalicylate/menthol patches) for carpal tunnel-related symptoms. The worker also used gabapentin regularly to help treat these symptoms. Although the recent notes state that using Salonpas patches "help with her pain," there was no stated functional gain directly related to the use of these patches, and reports of pain worsening suggest the relief isn't significant. Therefore, this request for Salonpas patches is not medically necessary at this time.