

<b>Case Number:</b>	CM15-0221642		
<b>Date Assigned:</b>	11/17/2015	<b>Date of Injury:</b>	01/14/2015
<b>Decision Date:</b>	12/30/2015	<b>UR Denial Date:</b>	10/16/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/11/2015

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, 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 62 year old male who sustained an industrial injury 01-14-15. A review of the medical records reveals the injured worker is undergoing treatment for concussion with loss of consciousness, cervical and lumbar disc degeneration, lordosis, sprain of ligament of cervical and lumbar spine, lumbar spondylolisthesis, and facet hypertrophy. Medical records (10-15-15) reveal the injured worker reports his neck and low back are better, with pain currently rated at 3/10. He reports occasional headaches, stiffness, tightness, and sleep disruption. The physical exam (10-15-15) reveals decreased cervical and lumbar range of motion. Posture and gait are noted to be "good." Prior treatment includes medications including Terocin lotion, Motrin, and Ultram, as well as physical therapy and a home exercise program. The original utilization review (10-16-15) non certified the request for Terocin lotion 120ml. The documentation supports that the injured worker has been on Terocin lotion since at least 04-22-15.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Terocin lotion 120ml, no refills (Lidocaine, etc.): 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): Topical Analgesics.

**Decision rationale:** Terocin contains methyl salicylate, capsaicin, menthol, and lidocaine. Topical lidocaine in a formulation that does not involve a dermal-patch system can be recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy with a tricyclic or SNRI anti-depressant or an antiepilepsy drug such as gabapentin or Lyrica. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it up, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. Guidelines address the use of capsaicin, which is believed to work through a similar mechanism and is recommended as an option in patients who have not responded or are intolerant to other treatments. By prescribing a multiple combination medication, in addition to the increased risk of adverse side effects, it would be difficult or impossible to determine whether any derived benefit was due to a particular component. In this case, there are other single component topical treatments with generic availability that could be considered. The claimant has not had a trial of first-line therapy for neuropathic pain. This medication is not medically necessary.