

<b>Case Number:</b>	CM15-0032098		
<b>Date Assigned:</b>	02/25/2015	<b>Date of Injury:</b>	09/19/2011
<b>Decision Date:</b>	04/03/2015	<b>UR Denial Date:</b>	02/19/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/20/2015

### 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: Arizona, California

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 38 year old female, who sustained an industrial injury on 9/19/2011. She reports a slip and fall. Diagnoses include cervical and lumbar radiculopathy, cervical and lumbar bulging disc, cervical and lumbar sprain/strain and left hip sprain/strain. Treatments to date include physical therapy, exercise, TENS (transcutaneous electrical nerve stimulation) and medication management. A Request for Authorization from 3/6/2014 was the only record provided and it indicates the injured worker reported low back pain and bilateral hip pain. On 2/19/2015, Utilization Review non-certified the request for Gabapentin 10%/Amitriptyline 10%/Bupivacaine 5% cream base 210 grams and Flurbiprofen 20%/Baclofen 5%/Dexamethasone 2% / Menthol 12%/Camphor 2%/Capsaicin 0.25% cream 210 grams, citing MTUS.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MED NPCI Gabapentin 10%/Amitriptyline 10%/Bupivacaine 5% cream base 210 gm:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Compound drug;Topical Analgesics; NSAIDs Page(s): 111,113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines topical analgesics Page(s): 111-112.

**Decision rationale:** According to the MTUS guidelines, topical analgesics are recommended as an option as indicated below. They are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of anti-depressants and anti-convulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. Topical Gabapentin are not recommended due to lack of evidence. Since the compound above contains Gabapentin, the compound in question is not medically necessary.

**MED MPHCC1-Flubiprofen 20%/ Baclofen 5%/Dexamethasone 2%Menthol12%/Camphor 2%/ Capsaicin0.25% cream 210gm:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Compound drug; Topical analgesics; NSAIDs Page(s): 111, 113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines topical analgesics Page(s): 111-112.

**Decision rationale:** According to the MTUS guidelines, topical analgesics are recommended as an option as indicated below. They are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of anti-depressants and anti-convulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended Topical Baclofen is not recommended due to lack of evidence. Since the compound above contains Baclofen, the compound in question is not medically necessary.