

Case Number:	CM15-0032518		
Date Assigned:	02/26/2015	Date of Injury:	06/05/2013
Decision Date:	04/10/2015	UR Denial Date:	02/11/2015
Priority:	Standard	Application Received:	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: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 40 year old female who sustained a work related injury on June 5, 2013, after incurring injuries to her right elbow and shoulder while employed as a housekeeper at a hotel. She was diagnosed with a shoulder sprain, elbow sprain, and epicondylitis, right ulna neuropathy, right shoulder impingement syndrome and right shoulder tendonitis. Treatment included diagnostic imaging, physical therapy, and anti-inflammatory drugs medications. Currently, the injured worker complained of constant, sharp pain with numbness of the right hand and decreased range of motion. On February 11, 2015, a request for one prescription of Lidopro Ointment 121gm #1 was non-certified by Utilization Review, noting the California Medical Treatment Utilization Schedule Guidelines Chronic Pain Medical Treatment Guidelines.

IMR ISSUES, DECISIONS AND RATIONALES

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

LidoPro Ointment 121 Gram #1: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesic Page(s): 111-113.

Decision rationale: The patient presents with right shoulder and right elbow pain, rated 7/10. The request is for LIDOPRO OINTMENT 121 GRAM # 1. Physical examination on 02/14/15 to the right shoulder revealed tenderness to palpation to the external and anterior aspects, RTC and biceps groove, and the right trapezius. Physical examination to the right elbow revealed tenderness to palpation to both epicondyles and flexor and extensor compartments of the forearm. Per 02/04/15 progress report, patient's diagnosis include shoulder sprain/strain, injury elbow, forearm a wrist, sprain/strain forearm, right elbow lateral epicondylitis, right ulnar neuropathy to determine if at elbow or wrist level, right shoulder impingement syndrome, and right shoulder tendonitis. Patient's medications include Naproxen and Omeprazole. Patient's work status is usual duties. LidoPro lotion contains capsaicin, lidocaine, menthol, and methyl salicylate. Regarding topical analgesics, MTUS Guidelines page 111 has the following regarding topical creams, "topical analgesics are largely experimental and used with few randomized controlled trials to determine efficacy or safety." MTUS further states, "Any compounded product that contains at least 1 (or a drug class) that is not recommended is not recommended." In this case, only one progress report was provided. Treater is prescribing Lidopro for local treatment of pain and discomfort. The patient has pain in her right shoulder and elbow, for which this medication might be indicated. However, MTUS only supports Lidocaine in a patch formulation and not as a lotion, gel or other forms. Therefore the request IS NOT medically necessary.