

<b>Case Number:</b>	CM15-0034901		
<b>Date Assigned:</b>	03/03/2015	<b>Date of Injury:</b>	01/30/2010
<b>Decision Date:</b>	04/14/2015	<b>UR Denial Date:</b>	02/13/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/24/2015

### 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: North Carolina, Georgia  
 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 37 year old male, who sustained an industrial injury on 1/30/10. He has reported back pain related to a twisting injury. The diagnoses have included failed lumbar spine surgery, lumbar radiculopathy, right shoulder impingement and cervical degenerative disc disease. Treatment to date has included epidural injection, laminectomy, lumbar MRI, physical therapy and oral medications. As of the PR2 dated 1/13/15, the injured worker reports 7/10 low back pain with right lower extremity symptoms. The treating physician noted tenderness in the cervical and lumbar spine. The treating physician requested an MRI of the lumbar spine and Cyclobenzaprine 7.5mg #90. On 2/13/15 Utilization Review non-certified a request for an MRI of the lumbar spine and modified a request for Cyclobenzaprine 7.5mg #90 to Cyclobenzaprine 7.5mg #60. The utilization review physician cited the MTUS and ACOEM guidelines. On 2/22/15, the injured worker submitted an application for IMR for review of an MRI of the lumbar spine and Cyclobenzaprine 7.5mg #90.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**MRI of the Lumbar Spine:** Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 303.

**Decision rationale:** ACOEM chapter on back complaints describes that MRI is indicated when there are unequivocal objective findings of specific nerve compromise in a person with symptoms who do not respond to treatment and for whom surgery would be a reasonable intervention. The medical record describes new lower extremity radicular symptoms since the previous MRI of 2012 for which assessment by MRI is indicated. I am overturning the original UR decision based on this new clinical information.

**Cyclobenzaprine 7.5mg #90:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Muscle Relaxant Page(s): 63-64.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Section 2 Page(s): 63-66.

**Decision rationale:** The CA MTUS allows for the use, with caution, of non sedating muscle relaxers as second line treatment for acute exacerbations of chronic low back pain. While they may be effective in reducing pain and muscle tension, most studies show no benefits beyond NSAIDs in pain relief. Efficacy diminishes over time and prolonged use may lead to dependency. There is no recommendation for ongoing use in chronic pain. The medical record in this case does not document an acute exacerbation and the request is for ongoing regular daily use of cyclobenzaprine. This is not medically necessary and the original UR decision is upheld.