

Case Number:	CM15-0036785		
Date Assigned:	03/05/2015	Date of Injury:	11/03/2009
Decision Date:	04/09/2015	UR Denial Date:	02/05/2015
Priority:	Standard	Application Received:	02/26/2015

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 57-year-old female, who sustained an industrial injury on 11/3/9. The injured worker has complaints of mid back pain associated with interference with sleep, feels anxious and notices numbness in both hands and great toe of left foot after the end of a stressful day. The documentation noted that the injured worker had been to the emergency department times three since April 2014 due to stress and chest pain. The diagnoses have included fibromyositis; displacement of lumbar intervertebral disc without myelopathy; depressive disorder and displacement of thoracic intervertebral disc without myelopathy. According to the utilization review performed on 2/5/15, the requested Salonpas 10%-3% adhesive patch #6 box(s) with 2 refills and Tylenol extra strength 500mg #90 with 2 refills has been non-certified. California Medical Treatment Utilization Schedule (MTUS), Chronic Pain Medical Treatment Guidelines was used in the utilization review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Salonpas 10%-3% adhesive patch #6 box(s) with 2 refills: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate topicals Page(s): 105.

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. In the case of this worker, who had lidocaine and Flector patches disapproved and subsequently were discontinued, she was recommended Salonpas patches, which contain methyl salicylate and menthol. It is reasonable to trial this medication for a few weeks to a month duration, in the opinion of the reviewer, however, 2 refills is not necessary in order to trial it. Therefore, this particular request for Salonpas patches will be considered medically unnecessary.

Tylenol extra strength 500mg #90 with 2 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines acetaminophen (APAP).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Acetaminophen Page(s): 12.

Decision rationale: According to the MTUS Chronic Pain Treatment Guidelines, acetaminophen is recommended for treatment of chronic pain & acute exacerbations of chronic pain. With new information questioning the use of NSAIDs, acetaminophen should be recommended on a case-by-case basis. The side effect profile of NSAIDs may have been minimized in systematic reviews due to the short duration of trials. On the other hand, it now appears that acetaminophen may produce hypertension, a risk similar to that found for NSAIDs. Acetaminophen may be considered for use in osteoarthritis and low back pain. Although there is some evidence to suggest acetaminophen increases risk for hypertension and cardiovascular risk, the primary and better known adverse effect of acetaminophen use is hepatotoxicity, and it should be used in caution by those with liver disease or regular alcohol consumption. There is insufficient evidence that shows us the true safety of taking acetaminophen regularly for a long duration of time in chronic pain, however, the side effect profile appears to be more favorable than NSAIDs. The recommended dose for mild to moderate pain is 650 to 1000 mg every 4 hours, with a maximum of 4 g/day. In the case of this worker, she had been taking acetaminophen chronically for her pain. However, the documentation provided insufficiently showed functional gains or pain reduction directly related to the regular use of this medication. Therefore, without clear documented evidence of benefit with use, the Tylenol extra strength 500 mg #90 with 2 refills will be considered medically unnecessary.