

<b>Case Number:</b>	CM15-0037841		
<b>Date Assigned:</b>	03/06/2015	<b>Date of Injury:</b>	11/15/2004
<b>Decision Date:</b>	04/14/2015	<b>UR Denial Date:</b>	01/29/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	02/27/2015

### 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, Michigan, California  
 Certification(s)/Specialty: Neurology, Neuromuscular Medicine

### 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 November 15, 2004. She has reported neck pain radiating down both arms. The diagnoses have included cervicogenic head pain syndrome, cervical spondylosis, bilateral cervicothoracic strain, repetitive strain injuries in the bilateral upper extremities with extensor tenosynovitis, chronic lumbar spine strain, spasm of muscle, cervical radiculopathy, cervical disc disorder, nausea and thoracic strain. Treatment to date has included radiographic imaging, diagnostic studies, TENS treatments, conservative therapies, steroid epidural injections, pain medications and work restrictions. Currently, the IW complains of neck pain radiating to bilateral upper extremities. The injured worker reported an industrial injury in 2004, resulting in the above noted chronic pain. She has been treated conservatively and with multiple steroid epidural injections without resolution of the pain. She reported feelings of frustration secondary to the chronic pain. Evaluation on February 11, 2015, revealed continued pain and frustration. Pain medications, anxiolytics and muscle relaxers were renewed.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Soma 350mg quantity 30:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines SOMA Page(s): 29.

**Decision rationale:** According to MTUS guidelines, a non sedating muscle relaxants is recommended with caution as a second line option for short term treatment of acute exacerbation in patients with chronic lumbosacral pain. Efficacy appears to diminish over time and prolonged use may cause dependence. According to the provided file, there is no documentation of muscle spasms, cramping or trigger points that require treatment with a muscle relaxant. There is no justification for prolonged use of Soma. The request for Soma 350mg quantity 30 is not medically necessary.

**Fiorinal quantity 90:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Sedative-Hypnotic Toxicity <http://emedicine.medscape.com/article/818430-overview#showall>.

**Decision rationale:** Fiorinal is a combination of Caffeine, Barbiturate and Aspirin. It is used for the treatment of headaches. It is not indicated for long term use for chronic back, neck and musculoskeletal pain syndrome because of risk of addiction. Therefore, the request for the use of Fiorinal quantity 90 is not medically necessary.