

Case Number:	CM15-0046196		
Date Assigned:	03/18/2015	Date of Injury:	06/20/2013
Decision Date:	04/23/2015	UR Denial Date:	02/09/2015
Priority:	Standard	Application Received:	03/11/2015

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, Pain Management

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 52-year-old male, who sustained an industrial injury on 6/20/13. The injured worker has complaints of bilateral low back pain, right more painful than left and radiating to his right buttocks and right posterolateral thigh with radicular calf pain. Tenderness upon palpation of the lumbar paraspinal muscles, the right sacroiliac joints and the right inguinal hernia. The diagnoses have included bilateral inguinal hernias; chronic right S1 radiculopathy as shown by electromyogram with nerve conduction study; bilateral inguinal hernias; right paracentral disc protrusion at L5-S1 measuring 3 millimeter that abuts the right S1 nerve; lumbar facet joint arthropathy and right L5-S1 radiculopathy with right lower extremity weakness. The documentation noted that skelaxin is used to treat the injured worker daily painful spasms that interfere with activities of daily living and sleep. Trazodone is used to treat the injured workers disturbed sleep cycles, which are common to patients with chronic pain. Phenergan is to treat the injured worker nausea secondary to his industrial pain medications.

IMR ISSUES, DECISIONS AND RATIONALES

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

Skelaxin 800mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 63.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines 8 C.C.R. Section 9792.20 9792.26 MTUS (Effective July 18, 2009) Page(s): 63-66 of 127.

Decision rationale: Regarding the request for metaxalone (Skelaxin), Chronic Pain Medical Treatment Guidelines support the use of non-sedating muscle relaxants to be used with caution as a 2nd line option for the short-term treatment of acute exacerbations of pain. Guidelines go on to state that metaxalone specifically is thought to work by general depression of the central nervous system. Within the documentation available for review, there is no identification of a specific analgesic benefit or objective functional improvement as a result of the metaxalone. Additionally, it does not appear that this medication is being prescribed for the short-term treatment of an acute exacerbation, as recommended by guidelines. In the absence of such documentation, the currently requested metaxalone (Skelaxin) is not medically necessary.

Trazadone 50mg #30: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 13-14. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITY GUIDELINES (ODG) Chronic Pain, Sleep Medication, Insomnia treatment.

Decision rationale: Regarding the request for trazodone, California MTUS does not address the issue. ODG recommends the short-term use (usually two to six weeks) of pharmacological agents only after careful evaluation of potential causes of sleep disturbance. They go on to state the failure of sleep disturbances to resolve in 7 to 10 days, may indicate a psychiatric or medical illness. It is recommended that treatments for insomnia should reduce time to sleep onset, improve sleep maintenance, avoid residual effects and increase next day functioning. Within the documentation available for review, there is no clear description of insomnia, no statement indicating what behavioral treatments have been attempted for the condition of insomnia, and no clear rationale for long-term use of the medication despite the recommendations of the guidelines. In the absence of such documentation, the currently requested trazodone is not medically necessary.

Phenergan 25mg #120: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain chapter.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Chronic Pain Chapter, Antiemetics.

Decision rationale: Regarding the request for promethazine (Phenergan), California MTUS guidelines do not contain criteria regarding the use of antiemetic medication. ODG states that antiemetics are not recommended for nausea and vomiting secondary to chronic opioid use. Guidelines go on to state that promethazine is approved as a sedative and antiemetic for perioperative use. Within the documentation available for review, there is no indication that promethazine is being used to treat perioperative nausea or a rationale for the use of this medication despite the recommendations of the guidelines. In the absence of clarity regarding those issues, the currently requested promethazine (Phenergan) is not medically necessary.