

Case Number:	CM15-0059336		
Date Assigned:	04/03/2015	Date of Injury:	07/18/2005
Decision Date:	05/08/2015	UR Denial Date:	03/02/2015
Priority:	Standard	Application Received:	03/30/2015

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, North Carolina
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 54 year old female who sustained an industrial injury on 07/08/05. Initial complaints and diagnoses are not available. Treatments to date include medications. Diagnostic studies include a MRI of the lumbar spine. Current complaints include neck and back pain. In a progress note dated 01/09/15 the treating provider reports the plan of care as continued medications including Norflex, Pamelor, Neurontin, Ketoprofen, and Prilosec. The requested treatment is omeprazole.

IMR ISSUES, DECISIONS AND RATIONALES

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

Omeprazole 20mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDS - GI and cardiovascular risk factors.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs, GI symptoms and cardiovascular risk Page(s): 68.

Decision rationale: The MTUS states that proton pump inhibitors such as Prilosec are appropriate for patients with risk factors for gastrointestinal events. Risk factors include age

greater than 65 years, history of peptic ulcer, GI bleeding or perforation, concurrent use of ASA, corticosteroids, and/or anticoagulants or high dose/multiple NSAIDs. The patient is 54 years old, with no history of peptic ulcer, GI bleeding or perforation. Progress notes do not document the use of ASA, corticosteroids, anticoagulants or high dose/multiple NSAIDs. Thus the patient has no GI risk factors and the request for Prilosec is not medically necessary.