

Case Number:	CM15-0083569		
Date Assigned:	05/06/2015	Date of Injury:	02/24/2010
Decision Date:	09/14/2015	UR Denial Date:	03/28/2015
Priority:	Standard	Application Received:	05/01/2015

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: Texas, Florida

Certification(s)/Specialty: Anesthesiology, 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 53-year-old female, who sustained an industrial injury on 2/24/2010. The current diagnoses are carpal tunnel syndrome, shoulder pain, cervical degenerative disc disease, abdominal pain, acid reflux, constipation, hemorrhoids, and bright red blood per rectum. There are associated diagnoses of anxiety, stress, depression and insomnia. According to the progress report dated 11/13/2014, the injured worker complains of abdominal pain, acid reflux, vomiting, constipation, melena, hemorrhoids, and bright red blood per rectum. The current medications are Miralax, Colace, Simethicone, Probiotics, and Preparation H. Treatment to date has included medications management and evaluations by an Internist and GI doctors. The plan of care includes updated cardio-respiratory diagnostic testing, random labs (GI profile and urinalysis), Miralax, Colace, Simethicone, Probiotics, and Preparation H. The pain medications listed are Hydrocodone/Acetaminophen and Omeprazole. On 11/13/2014, it was noted that the IW had completed laboratory tests, cardio-respiratory and GI evaluations. GI and Internist doctors were following the IW.

IMR ISSUES, DECISIONS AND RATIONALES

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

1 Updated Cardio-respiratory diagnostic testing: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 66-73. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter NSAIDs Opioids.

Decision rationale: The CA MTUS and the ODG guidelines recommend that patients can be evaluated adverse systemic and organ damage associated with work injury or the treatment of work related injuries. The records indicate that the patient completed comprehensive laboratory and cardio-respiratory that did not show any significant abnormality. There is no documentation of worsening of the GI or systemic symptoms. GI and Internist doctors had already evaluated the patient. The criteria for 1 Update Cardio-respiratory diagnostic testing. This request is not medically necessary.

1 Random labs (GI profile): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation University of Michigan Health System. Evaluation and management of gallstone-related diseases in non-pregnant adults. Anna Arbor (MI): University of Michigan Health System; 2014 May. 14 p.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 66-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter NSAIDs Opioids.

Decision rationale: The CA MTUS and the ODG guidelines recommend that patients can be evaluated adverse systemic and organ damage associated with work injury or the treatment of work related injuries. The records indicate that the patient completed comprehensive laboratory and cardio-respiratory that did not show any significant abnormality. There is no documentation of worsening of the GI or systemic symptoms. GI and Internist doctors had already evaluated the patient. The criteria for 1 Random labs (GI) profile testing was not met. This request is not medically necessary.

1 random lab (Urinalysis): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation University of Michigan Health System. Evaluation and management of gallstone-related diseases in non-pregnant adults. Anna Arbor (MI): University of Michigan Health System; 2014 May. 14 p; Official Disability Guidelines (ODG), Pain (Chronic).

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 66-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter NSAIDs Opioids.

Decision rationale: The CA MTUS and the ODG guidelines recommend that patients can be evaluated for adverse systemic and organ damage associated with work injury or the treatment of work related injuries. The records indicate that the patient completed comprehensive laboratory and cardio-respiratory that did not show any significant abnormality. There is no documentation of worsening of the GI or systemic symptoms. GI and Internist doctors had already evaluated the patient. The criteria for 1 Random Lab (Urinalysis) diagnostic testing was not met. This request is not medically necessary.

1 prescription for Miralax 1 bottle with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation McKay SL, Fravel M, Scanlon C. Management of constipation. Iowa City (IA): University of Iowa Gerontological Nursing Intervention Research Center, Research Translation and Dissemination Core-2009 Oct. 51 p.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Opioids.

Decision rationale: The CA MTUS and the ODG guidelines recommend that prophylaxis against opioid induced constipation can be instituted at the beginning and continued during chronic opioid treatment. It is also recommend that measures including increased fluid and fiber intake and reduction of opioid dosage be tried before additional laxatives/stool softeners are utilized. The guidelines recommend that proton pump inhibitors be utilized for the prevention and treatment of NSAIDs associated gastritis and GI bleeding. The records did not show that the patient is utilizing NSAIDs. There is no documentation that prophylactic measures have failed. The patient is utilizing Omeprazole and multiple medications for the prevention of GI symptoms. The records indicate that an Internist and GI doctors were also managing the GI symptoms concurrently. There is lack of guidelines support for the utilization of Milarax in the management of non-opioid induced gastrointestinal effects. The criteria for the use of Miralax 1 bottle 2 refills were not met. This request is not medically necessary.

1 prescription for Colace 100mg #60 with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation McKay SL, Fravel M, Scanlon C. Management of constipation. Iowa City (IA): University of Iowa Gerontological Nursing Intervention Research Center, Research Translation and Dissemination Core, 2009 Oct. 51 p.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 74-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Opioid NSAIDs.

Decision rationale: The CA MTUS and the ODG guidelines recommend that prophylaxis against opioid induced constipation can be instituted at the beginning and continued during chronic opioid treatment. It is also recommend that measures including increased fluid and fiber

intake and reduction of opioid dosage tried before additional laxatives/stool softeners are utilized. The guidelines recommend that proton pump inhibitors be utilized for the prevention and treatment of NSAIDs associated gastritis and GI bleeding. The records did not show that the patient is utilizing NSAIDs. There is no documentation that prophylactic measures have failed. The patient is utilizing Omeprazole and multiple medications for the prevention of GI symptoms. The records indicate that an Internist and GI doctors were also managing the GI symptoms concurrently. There is lack of guidelines support for the utilization of Colace in the management of opioid induced gastrointestinal effects such as GI bleed. The criteria for the use of Colace 100mg #60 2 refills was not met. This request is not medically necessary.

1 prescription for simethicone 80mg #60 with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 67-73, 74-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Opioids NSAIDs.

Decision rationale: The CA MTUS and the ODG guidelines recommend that prophylaxis against opioid induced constipation can be instituted at the beginning and continued during chronic opioid treatment. It is also recommend that measures including increased fluid and fiber intake and reduction of opioid dosage tried before additional laxatives/stool softeners are utilized. The guidelines recommend that proton pump inhibitors be utilized for the prevention and treatment of NSAIDs associated gastritis and GI bleeding. The records did not show that the patient is utilizing NSAIDs. There is no documentation that prophylactic measures have failed. The patient is utilizing Omeprazole and multiple medications for the prevention of GI symptoms. The records indicate that an Internist and GI doctors were also managing the GI symptoms concurrently. There is lack of guidelines support for the utilization of simethicone in the management of opioid induced gastrointestinal effects. The criteria for the use of simeticone 80mg #60 with 2 refills were not met. This request is not medically necessary.

1 prescription for Probiotics #60 with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 67-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter Opioids NSAIDs.

Decision rationale: The CA MTUS and the ODG guidelines recommend that prophylaxis against opioid induced constipation can be instituted at the beginning and continued during chronic opioid treatment. It is also recommend that measures including increased fluid and fiber intake and reduction of opioid dosage tried before additional laxatives/stool softeners are utilized. The guidelines recommend that proton pump inhibitors be utilized for the prevention

and treatment of NSAIDs associated gastritis and GI bleeding. The records did not show that the patient is utilizing NSAIDs. There is no documentation that prophylactic measures have failed. The patient is utilizing Omeprazole and multiple medications for the prevention of GI symptoms. The records indicate that an Internist and GI doctors were also managing the GI symptoms concurrently. There is lack of guidelines support for the utilization of Probiotics in the management of opioid induced gastrointestinal effects. The criteria for the use of Probiotics #60 with 2 refills were not met. This request is not medically necessary.

1 prescription for Preparation H cream with 2 refills: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Rivadeneira DE, Steele SR, Ternent C, Chalsani S, Bule WD, Rafferty JL, Standards Practice Task Force of the American Society of Colon and Rectal Surgeons. Practice parameters for the management of hemorrhoids (revised 2010). Dis Colon Rectum. 2011 Sep; 54(9): 1059-64.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 66-96. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain Chapter NSAIDs Opioids.

Decision rationale: The CA MTUS and the ODG guidelines recommend that prophylaxis against opioid induced constipation can be instituted at the beginning and continued during chronic opioid treatment. It is also recommend that measures including increased fluid and fiber intake and reduction of opioid dosage tried before additional laxatives/stool softeners are utilized. The guidelines recommend that proton pump inhibitors be utilized for the prevention and treatment of NSAIDs associated gastritis and GI bleeding. The records did not show that the patient is utilizing NSAIDs. The patient is utilizing Omeprazole and multiple medications for the prevention of GI symptoms. The records indicate that the GI symptoms was also being investigated and treated by an Internist and GI doctors concurrently. There is lack of guidelines support for the utilization of Preparation H cream for the management pain medication induced gastrointestinal effects. The criteria for the prescription of 1 Preparation H cream with 2 refills was not met. The criteria for the use of 1-prescription H cream with 2 refills were not met. This request is not medically necessary.