

Case Number:	CM15-0083746		
Date Assigned:	06/01/2015	Date of Injury:	11/20/2013
Decision Date:	06/25/2015	UR Denial Date:	04/09/2015
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: Arizona, California

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 36 year old male, who sustained an industrial injury on 11/20/2013. He has reported subsequent low back pain radiating to the right leg and was diagnosed with lumbar radiculopathy, lumbar spondylosis and lumbar myofascial sprain/strain. Treatment to date has included oral pain medication, physical therapy and surgery. In a progress note dated 04/01/2015, the injured worker complained of low back pain. Objective findings were notable for tenderness to palpation of the L4-L5 and L5-S1 paravertebral musculature and right buttock, positive straight leg raise of the right lower extremity in sitting and supine positions and antalgic gait. A request for authorization of Duexis and Tramadol was submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Duexis 800/26.6mg #90: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 47, Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs). Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Physician Dispensed medications.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs
Page(s): 67.

Decision rationale: According to the guidelines, Duexis is an NSID combined with an H blocker. According to the guidelines, NSAIDs are recommended as a second-line treatment after acetaminophen. Acetaminophen may be considered for initial therapy for patients with mild to moderate pain. NSAIDs are recommended as an option for short-term symptomatic relief. In this case, the claimant had been Norco for an unknown length of time. Pain scores were 6/10. Duexis request was submitted. Although NSAIDs are 1st line over opioids for musculoskeletal pain, there was no indication of GI risk factors or bleeding disorders to need a combined H2 blocker. The request was also applied with another opioid (Tramadol). There was no mention of a weaning program. The request for Duexis is not medically necessary.

Tramadol 50mg #60: 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), Physician Dispensed medications.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Tramadol
Page(s): 92-9.

Decision rationale: Tramadol is a synthetic opioid affecting the central nervous system. According to the MTUS guidelines, Tramadol is recommended on a trial basis for short-term use after there has been evidence of failure of first-line non-pharmacologic and medication options (such as acetaminophen or NSAIDs) and when there is evidence of moderate to severe pain. Although it may be a good choice in those with back pain, no one opioid is superior to another. The claimant had previously been on Norco. Indication to add and combine Tramadol with NSAID was not justified. The request for Tramadol is not medically necessary.