

<b>Case Number:</b>	CM15-0087260		
<b>Date Assigned:</b>	05/11/2015	<b>Date of Injury:</b>	09/06/2012
<b>Decision Date:</b>	06/10/2015	<b>UR Denial Date:</b>	05/01/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/06/2015

### 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, Alabama, 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:

This 38 year old male sustained an industrial injury on 9/6/12. He subsequently reported right wrist injury and pain. Diagnoses include status post right wrist fusion and left knee internal derangement. Treatments to date include MRI testing, surgery, physical therapy and prescription pain medications. The injured worker continues to experience bilateral shoulder and left knee pain. On examination, there is reduced range of motion in the bilateral shoulders and negative Neer's and Hawkins impingement signs. The left knee reveals tenderness to palpation on the medial joint line, positive McMurray's, positive patellofemoral crepitation and positive grind. A request for Trial of Dendracin lotion #120ml (no refill) and Lidocaine gel medications was made by the treating physician.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Lidocaine 5% gel (no refill):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 112.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Lidoderm (lidocaine patch) Page(s): 56.

**Decision rationale:** According to MTUS guidelines, "Lidoderm is the brand name for a lidocaine patch produced by ██████████ Pharmaceuticals. Topical lidocaine may be recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (tri-cyclic or SNRI anti-depressants or an AED such as gabapentin." In this case, there is no documentation that the patient developed neuropathic pain that did not respond to first line therapy and the need for Lidocaine gel is unclear. There is no documentation of efficacy of previous use of Lidocaine gel. Therefore, the prescription of Lidocaine 5% gel is not medically necessary.

**Trial of Dendracin lotion #120ml (no refill):** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-112.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate topicals Section Page(s): 126.

**Decision rationale:** Dendracin is formed by methyl salicylate, mentol and benzocaine. According to MTUS, salicylate topicals is recommended and is better than placebo. Benzocaine (similar to lidocaine) could be recommended in neuropathic pain. There is no strong controlled studies supporting the efficacy of dendracin. Furthermore, it is not clear from the records that the patient failed oral first line therapies such as anticonvulsant or developed unacceptable adverse reactions from the use of these medications. Therefore, the trial of Dendracin lotion is not medically necessary.