

<b>Case Number:</b>	CM15-0089359		
<b>Date Assigned:</b>	05/13/2015	<b>Date of Injury:</b>	04/07/2012
<b>Decision Date:</b>	06/19/2015	<b>UR Denial Date:</b>	04/15/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/08/2015

### 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: Iowa, Illinois, Hawaii

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, Public Health & General Preventive 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:

The injured worker is a 51-year-old male who sustained an industrial injury on 04/07/12. Initial complaints include right shoulder pain. Initial diagnoses are not available. Treatments to date include physical therapy, 2 cortisone injections into the right shoulder, and medications. Diagnostic studies include a reported MRI of the right shoulder performed on 07/14/14, which was not available for review in the submitted record. Current complaints include right shoulder and lumbar spine pain. Current diagnoses include right shoulder tendonitis/bursitis, bilateral elbow epicondylitis, bilateral forearm /wrist overuse, and lumbar spine strain/sprain with bilateral lower extremity radiculopathy. In a progress note dated 03/26/15, the treating provider reports the plan of care as evaluation for shoulder surgery, Ultram, bilateral foot orthotics, and a dermatology consultation. The requested treatment is Ultram.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Ultram ER (extended release) 100mg, #90:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Tramadol (Ultram); Opioids for neuropathic pain.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, Tramadol, Ultram Page(s): 74-96, 113, 123. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic) - Medications for acute pain (analgesics), Tramadol (Ultram).

**Decision rationale:** Ultram is the brand name version of tramadol, which is classified as central acting synthetic opioids. MTUS states regarding tramadol "A therapeutic trial of opioids should not be employed until the patient has failed a trial of non-opioid analgesics. Before initiating therapy, the patient should set goals, and the continued use of opioids should be contingent on meeting these goals." ODG further states, "Tramadol is not recommended as a first-line oral analgesic because of its inferior efficacy to a combination of Hydrocodone/ acetaminophen." The treating physician did not provide sufficient documentation that the patient has failed a trial of non-opioid analgesics at the time of prescription or in subsequent medical notes. Additionally, no documentation was provided which discussed the setting of goals for the use of Ultram prior to the initiation of this medication. The provided medical documentation shows no evidence of functional improvement. The original utilization review recommended weaning and modified the request to 60 tablets, which is appropriate. As such, the request for Ultram ER (extended release) 100mg, #90 is not medically necessary.