

<b>Case Number:</b>	CM13-0063646		
<b>Date Assigned:</b>	12/30/2013	<b>Date of Injury:</b>	01/30/2006
<b>Decision Date:</b>	03/21/2014	<b>UR Denial Date:</b>	12/02/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/10/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine and is licensed to practice in California. 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 physician 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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 is a 55 year-old female who was injured on 1/30/06. According to the 11/22/13 report from [REDACTED], she presents with low back pain and radiculopathy. The patient underwent ALIF fusion on L5/S1 in Oct. 2009, which was complicated with a colon perforation and required ileostomy. She is status post ileostomy removal on 2/10/10. She also had bladder surgery on 4/18/11 and hernia surgery on 1/4/13. She was taking Norco 5/325mg bid, and Lidoderm patches.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Hydrocodone/APAP 5/325mg #60:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Opioids, Criteria for Use of Opioids Page(s): 88-89.

**Decision rationale:** The patient presents with lower back pain, status post fusion with complication of colon perforation and subsequent ileostomy and ileostomy removal on 2/10/10. More recently on 1/4/13 she had a hernia repair. [REDACTED] has been managing the patient's pain

medications and reports the patient has been stable with medications and they do help with her pain. The physician is aware of the GI issues and has the patient on low dose Norco 5/325mg bid, to minimize constipation. The physician is also using Lidoderm patches for pain control. MTUS states pain should be assessed each visit and function every 6-months. The records do show that pain was assessed each visit. From 5/15/13 through 11/22/13, and function was assessed on 10/3/13. The patient does appear stable on the current medications, pain ranged between 5-6/10 on most visits except on 7/11/13 it was 7/10 and 9/5/13 it was 4/10. MTUS for long-term users of opioids, strategy for maintenance states not to attempt to lower the dose if it is working. The continued use of hydrocodone/APAP 5/325mg appears to be in accordance with MTUS guidelines.

**Lidoderm patch 5% #30:** Overturned

**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 Lidoderm, Topical Analgesics Page(s): 56-57, 111-113.

**Decision rationale:** The patient is known to have neuropathic pain. MTUS guidelines state Lidoderm patches can be used after trials of tricyclics, or SNRI or AED. The records available go back through 2/19/13. Prior to that date it is unknown what medications were trialed, but from 2/19/13 through 11/22/13, there is documentation of use of Wellbutrin and Savella (which is an SNRI). The patient is reported to have GI issues and to avoid constipation; the physician does not want the patient relying on the opiate analgesics. The physician has shown the patient is stable with the current dosage of Norco and Lidoderm patches. The request appears to be in accordance with MTUS guidelines.