

<b>Case Number:</b>	CM14-0124111		
<b>Date Assigned:</b>	08/08/2014	<b>Date of Injury:</b>	09/26/2006
<b>Decision Date:</b>	11/18/2014	<b>UR Denial Date:</b>	07/15/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	08/06/2014

### 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. The expert reviewer is Board Certified in Internal Medicine, 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 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/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:

The injured worker is a 46 year old male whose date of industrial injury was 9/26/2006. The diagnoses included lumbar sprain / strain, and lumbar radiculopathy, documented by EMG, and disk degeneration with herniation. The injured worker is currently taking Norco orally, Protonix, and the request is for Fioricet. No headache was documented in the last note from May 30, 2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Fioricet Daily #30:** Upheld

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

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Chronic Pain, Fioricet / Barbiturate containing analgesic

**Decision rationale:** Although Fioricet is used for headache by some providers, it contains a barbiturate and is associated with risks of dependence, sedation, respiratory depression, inadvertent overdose, intentional overdose and adds very little in terms of pain relief compared to many safer alternatives. The patient is on Norco alongside and that would have an additive effect in terms of respiratory depression. There is also the risk of overuse headache and rebound

headache with agents containing barbiturate. Most respected authorities have moved away from using this combination product and in fact, the ODG unequivocally recommends not to use this product for chronic pain or acute headache. Therefore, the request is not medically recommended.