

Case Number:	CM14-0180083		
Date Assigned:	11/04/2014	Date of Injury:	07/06/2009
Decision Date:	12/09/2014	UR Denial Date:	09/30/2014
Priority:	Standard	Application Received:	10/29/2014

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 Emergency 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 47 year-old male, who sustained an injury on July 6, 2009. The mechanism of injury is not noted. Pertinent diagnostics were not noted. Treatments have included L5-S1 fusion, physical therapy, and medications. The current diagnoses are status post L5-S1 fusion with residuals, right L5 radiculopathy, right knee strain, anxiety, depression, sleeplessness, and GE reflux. The stated purpose of the request for Tramadol 100mg, #60 for 30 days was not noted. The request for Tramadol 100mg, #60 for 30 days was denied on September 30, 2014. Per the report dated September 15, 2014, the treating physician noted complaints of lumbosacral and left knee pain. Exam findings included lumbar tenderness, spasm, and restricted range of motion with positive bilateral straight leg raising tests and Kemp's tests, and positive bilateral McMurray tests.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tramadol 100mg, #60 for 30 days: Upheld

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 Opioids, On-Going Management, Opioids for Chronic Pain and Tramadol Page(s): 78-80, 80-82,.

Decision rationale: The requested Tramadol 100mg, #60 for 30 days, is not medically necessary. The California MTUS Chronic Pain Treatment Guidelines, Opioids, On-Going Management, pages 78-80, Opioids for Chronic Pain, pages 80-82, and Tramadol, page 113, do not recommend this synthetic opioid as first-line therapy, and recommend continued use of opiates for the treatment of moderate to severe pain, with documented objective evidence of derived functional benefit, as well as documented opiate surveillance measures. The injured worker has lumbosacral and left knee pain. The treating physician has documented lumbar tenderness, spasm, and restricted range of motion with positive bilateral straight leg raising tests and Kemp's tests, and positive bilateral McMurray tests. The treating physician has not documented: failed first-line opiate trials, VAS pain quantification with and without medications, duration of treatment, objective evidence of derived functional benefit such as improvements in activities of daily living, or reduced work restrictions or decreased reliance on medical intervention, nor measures of opiate surveillance including an executed narcotic pain contract nor urine drug screening. Also, per New FDA warning, Ultram is now considered to place certain patients at higher risk for suicide. These patients include those that are: 1. suicidal, 2. suffering from emotional disturbance or depression, 3. addiction-prone, 4. taking tranquilizers or anti-depressant drugs, 5. use alcohol in excess. This injured worker has a documented history of depression. The criteria noted above not having been met, Tramadol 100mg, #60 for 30 days is not medically necessary.