

<b>Case Number:</b>	CM14-0074336		
<b>Date Assigned:</b>	07/16/2014	<b>Date of Injury:</b>	10/06/2010
<b>Decision Date:</b>	12/19/2014	<b>UR Denial Date:</b>	05/13/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/22/2014

### 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 Occupational 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 claimant was injured on 10/06/10. His mechanism of injury is unknown. Flector patches are under review. He has diagnoses of degeneration of the lumbar spine/lumbosacral intervertebral disc with unspecified backache and pain in his leg. There are also notes from 2012 that do not mention Flector patches. On 08/20/13, he was evaluated and was using Norco and temazepam. He had tenderness along the medial and lateral right knee. He was prescribed Cymbalta, Flector, and Norco. Again a specific indication for the use of Flector was not given. He had a QME on 11/21/13. He has had multiple other medical problems. On 11/11/13, he reported that he could not tolerate Cymbalta side effects. The Flector was continued. On 01/08/14, he was evaluated and was using Flector patches. He was doing home exercises and stated the medications helped. Again there is no specific mention of an indication for Flector patches. On 02/04/14, there is an AME supplemental report. On 03/05/14, he reported improvement in his abilities and he was using Flector patches on the right knee and was also taking Norco and Valium. There is a discussion of his use of Norco but not Flector patches although they were prescribed again. A medial branch block was under consideration. On 03/19/14, he had follow-up for his low back pain that radiated to both legs. It had increased and was level 9/10. He reported an abrupt increase in his pain and it was constant. His activity level had decreased. He had tried TENS unit, heat, and ice and his medications included Norco, Valium, and Flector patch for his right knee. He had joint line tenderness medially and laterally in the knee. An MRI of the lumbar spine was ordered. There is no mention of pain relief from the use of Flector patches. PT was ordered. He was given an increase in Norco and was to start Soma for muscle spasm. No refill of Flector was given. An MRI dated 04/02/14 showed no significant interval change with a stable right posterolateral disc protrusion at L3-4, disc bulge and left posterolateral disc

protrusion at L4-5, and disc bulge with left paracentral disc protrusion at L5-S1. The L4-5 disc protrusion caused mass effect on the exiting left L4 nerve root.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

**Flector Patch 1.3%:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines 9792.24.2, Title 8, Effective July 18, 2009..

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 143.

**Decision rationale:** The history and documentation do not objectively support the request for Flector patches 1.3%, quantity unknown. The MTUS p. 143 state "topical agents may be recommended as an option [but are] largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. (Namaka, 2004)." There is no evidence of failure of all other first line drugs. The claimant received refills of his other medications and stated that his medications helped. Only intolerance to Cymbalta is mentioned. There is no evidence of intolerance to or lack of effect of his oral medications and no evidence of failed trials of other first line drugs such as acetaminophen. Objective measurable evidence improvement and functional benefit to him specifically from the Flector patches has not been described. The medical necessity of Flector patches 1.3%, frequency of use and quantity unknown, has not been clearly demonstrated. Therefore, the request is not medically necessary.