

<b>Case Number:</b>	CM14-0096843		
<b>Date Assigned:</b>	07/28/2014	<b>Date of Injury:</b>	07/15/2009
<b>Decision Date:</b>	10/14/2014	<b>UR Denial Date:</b>	06/10/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/25/2014

### 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 Physical Medicine and Rehabilitation and is licensed to practice in Nevada. 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 records, presented for review, indicate that this 57-year-old man was reportedly injured on July 15, 2009. The most recent progress note, dated May 29, 2014, indicated that there were ongoing complaints of bilateral knees pains. Current medications include Metformin, Dilaudid, Celebrex, MS Sr, Promolaxin, and Omeprazole. The physical examination demonstrated an antalgic gait favoring the left lower extremity. Range of motion of the right knee was from 0 to 115 Examination of the left knee noted swelling and a negative McMurray's test and drawer test. There was diffuse bilateral numbness of the anterior knees. Diagnostic nerve conduction studies noted a left-sided L5 and S1 neuropraxia. Previous treatment included a left knee arthroscopy x 2 followed by a left knee replacement. A request had been made for Sentra PM, Sentra AM, Theramine, and Trepadone and was not medically necessary in the pre-authorization process on June 10, 2014.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Sentra PM twice daily #60: Upheld**

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment, Integrated Treatment/Disability Duration Guidelines, Pain (Chronic), Medical Food

**Decision rationale:** Sentra PM is a proprietary blend of Neurotransmitters And Neurotransmitter precursors (Choline Bitartrate, 5-Hydroxytryptophan, L-Glutamate); activators of precursor utilization (Acetyl-L-Carnitine, L-Glutamate, Cocoa Powder); stimulator of precursor uptake (Ginkgo Biloba); Polyphenolic Antioxidants (Cocoa Powder, Grape Seed Extract, Hawthorn Berry); An Adenosine Antagonist (Cocoa Powder); and an inhibitor of the attenuation of neurotransmitter production associated with precursor administration (Grape-Seed Extract). There is no indication for this medication in the treatment of knee pain. As such, this request for Sentra PM is not medically necessary.

**Sentra AM twice daily #60:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment, Integrated Treatment/Disability Duration Guidelines, Pain (Chronic), Medical Food

**Decision rationale:** Sentra AM is a proprietary blend of Neurotransmitters and Neurotransmitter Precursors (Choline Bitartrate, L-Glutamate); activators of precursor utilization (Acetyl-L-Carnitine, L-Glutamate, Cocoa Powder); Polyphenolic Antioxidants (Cocoa Powder, Grape-Seed Extract, Hawthorn Berry); An Adenosine Antagonist (Cocoa Powder); and an inhibitor of the attenuation of neurotransmitter production associated with precursor administration (Grape-Seed Extract). There is no indication for Sentra AM in the treatment of knee pain. As such, this request for Sentra AM is not medically necessary.

**Theramine three times daily #90:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment, Integrated Treatment/Disability Duration Guidelines, Pain (Chronic), Medical Food

**Decision rationale:** Theramine is a blend of Choline Bitartrae, L-Arginine, L-Histadine, L-Glutamine, L-Serine, GABA, Giffonia Seed, Whey Protein, Grape Seed Extract, Ginkgo Biloba, and Cinnamon and Cocoa. There is no indication for the use of Theramine in the treatment of knee pain. As such, this request for Theramine is not medically necessary.

**Treadadone four times daily #120:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment, Integrated Treatment/Disability Duration Guidelines, Pain (Chronic), Medical Food

**Decision rationale:** Trepadone is a proprietary blend of a neurotransmitter precursor (L-Histidine) And A Neurotransmitter (Gamma-Amino Butyric Acid [GABA]); Polyphenolic Antioxidants (Grape Seed Extract, Cocoa); Anti-Inflammatory Compounds (Omega-3 Fatty Acids, Bromelain And Histidine); Immunomodulatory Peptides (Whey Protein Hydrolysate); precursors of functional components of joint connective tissue (Glucosamine And Chondroitin Sulfate); and an Adenosine Antagonist (Cocoa Powder). There is no indication for Trepadone in the treatment of knee pain. As such, this request for Trepadone is not medically necessary.