

Case Number:	CM14-0097395		
Date Assigned:	09/16/2014	Date of Injury:	02/05/2009
Decision Date:	10/15/2014	UR Denial Date:	06/02/2014
Priority:	Standard	Application Received:	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 Pain Management 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 52-year-old male who sustained an injury on February 5, 2009. He is diagnosed with (a) knee pain and (b) pain in joint lower leg. He was seen on August 11, 2014 for an evaluation. He complained of bilateral knee pain. He reported that pain level had increased since last visit. He rated his pain with medications at 4/10 and without medications at 8/10. Examination of the lumbar spine revealed restricted range of motion due to pain. Lumbar facet loading was negative on both sides. Straight leg raising test was negative. There was tenderness over the coccyx sacroiliac spine. Examination of the right knee revealed restricted range of motion. Crepitus was noted with active movement. Tenderness was present over the lateral joint line, medial joint line, and patella. There was some pain with valgus and varus stress test. There was mild effusion in the right knee joint. Examination of the left knee revealed well-healed surgical scars. Range of motion was restricted and limited by pain. Crepitus was present with active movement. There was tenderness over the lateral joint line, medial joint line, and patella. Left knee was stable to valgus stress. There was mild effusion noted. Patellar grind test was positive.

IMR ISSUES, DECISIONS AND RATIONALES

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

Flexeril 10mg #60: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 47-79.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Cyclobenzaprine (Flexeril) Page(s): 41-42.

Decision rationale: The request for Flexeril 10 mg #60 is not medically necessary at this time. It has been determined from the medical records provided for review that the injured worker has been taking Flexeril since December 2013. Per the CA MTUS Guidelines, Flexeril is recommended as an option, using a short course of therapy. Cyclobenzaprine (Flexeril) is more effective than placebo in the management of back pain; the effect is modest and comes at the price of greater adverse effects. The effect is greatest in the first 4 days of treatment, suggesting that shorter courses may be better. Therefore long-term use of Flexeril is not recommended and therefore non certified.

Voltaren 1% gel #3: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 47-49, Chronic Pain Treatment Guidelines Topical Analgesics.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

Decision rationale: The request for Voltaren 1% gel #3 is not medically necessary at this time. According to the California Medical Treatment Utilization Schedule, there is little evidence to prove the efficacy of topical analgesics. Therefore based on the documents provided and the CA MTUS recommendations, the use of Voltaren gel is not medically necessary at this time.