

Case Number:	CM15-0005411		
Date Assigned:	01/16/2015	Date of Injury:	11/29/2011
Decision Date:	03/23/2015	UR Denial Date:	12/23/2014
Priority:	Standard	Application Received:	01/10/2015

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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California

Certification(s)/Specialty: Physical Medicine & Rehabilitation

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 reported an injury on 11/29/2011. The injury reportedly occurred when a 7,000 pound machine fell on top of him. His diagnoses include chronic mid and low back pain, bilateral leg pain, right knee pain, and thoracic and lumbar degenerative disc disease with radiculopathy. His past medical treatments included physical therapy, massage, TENS unit, and pain medications. On 12/02/2014, the injured worker complained of pain that he rated an 8/10 on a pain scale. He reported his pain was present 90% to 100% of the time. As part of the past treatment to date, the injured worker described pain medication and TENS unit as improving his condition. He reported physical therapy and massage worsened his condition. He reports as a result of the pain, he is unable to engage in any of his prior hobbies. In the past, the patient was prescribed hydrocodone, but it was not currently being prescribed. Upon physical examination, he was observed to be able to move from sitting to standing position and to walk in the room with what appeared to be a relatively nonantalgic pattern. It was noted the interview was far too prolonged to be able an adequate examination. The injured worker's medications were not included in the documentation. The request was for ibuprofen 800 mg #90. The rationale for the request was to assist with his pain and inflammation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Ibuprofen 800mg #90: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines NSAID's Page(s): 67.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Anti-inflammatory Medications Page(s): 22.

Decision rationale: The request for ibuprofen 800mg #90 is not medically necessary. According to the California MTUS Guidelines, anti-inflammatories are the traditional first line of treatment, to reduce pain so activity and functional restoration can resume, but long term use may not be warranted. The injured worker reported pain that he rated an 8/10 on a pain scale. However, the documentation did not provide sufficient evidence of significant objective functional limitation. The submitted documentation indicates the patient has diagnoses of hypertension. NSAIDs can increase blood pressure in patients with hypertension. The injured worker reported prior use of hydrocodone to treat his pain, and introduction of NSAIDs may exacerbate his blood pressure elevation. In the absence of documentation with sufficient evidence of significant objective functional limitations, documented evidence of controlled hypertension, and as the request was written there was no frequency provided, the request is not supported. Therefore, the request is non-certified.