

<b>Case Number:</b>	CM15-0010420		
<b>Date Assigned:</b>	01/28/2015	<b>Date of Injury:</b>	02/27/1998
<b>Decision Date:</b>	03/18/2015	<b>UR Denial Date:</b>	01/14/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/19/2015

### 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: Maryland

Certification(s)/Specialty: Internal Medicine, Rheumatology

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This 72 year old female sustained an industrial injury on 2/27/98. She subsequently reports chronic back pain. The injured worker has undergone lumbar spinal surgery. Prior treatments include an implanted spinal cord stimulator, injections and narcotic pain medications. The UR decision dated 1/14/15 non-certified Compound Cream: Cyclobenzaprine 2%, Fluriprofen 25% 180 Gram 1 Tube + 2 Refills; 2. Compound Cream: Capsaicin 0.025%, Flurbiprofen 15%, Gabapentin 10% &; 3. Menthol 2%, Camphor 2% 180 Grams 1 Tube With 2 refills. The Compound Cream: Cyclobenzaprine 2%, Fluriprofen 25% 180 Gram 1 Tube + 2 Refills; 2. Compound Cream: Capsaicin 0.025%, Flurbiprofen 15%, Gabapentin 10% &; 3. Menthol 2%, Camphor 2% 180 Grams 1 Tube With 2 refills was denied based on CA MTUS Chronic Pain Medical Treatment guidelines.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Compound cream: Cyclobenzaprine 2%, Flurbiprofen 25 %, 180 gm (1 tube) with 2 refills:**  
Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines  
Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Page(s): 111.

**Decision rationale:** This 72 year old female has complained of low back pain since date of injury 2/27/98. She has been treated with physical therapy, lumbar spine surgery, epidural steroid injections, spinal cord stimulator and medications. The current request is for compound cream: Cyclobenzaprine 2%, Flurbiprofen 25 %. Per the MTUS guidelines cited above, the use of topical analgesics in the treatment of chronic pain is largely experimental, and when used, is primarily recommended for the treatment of neuropathic pain when trials of first line treatments such as anticonvulsants and antidepressants have failed. There is no such documentation in the available medical records. On the basis of the MTUS guidelines cited above, compound cream: Cyclobenzaprine 2%, Flurbiprofen 25 % is not indicated as medically necessary.

**Compound cream: Capsaicin 0.025%, Flurbiprofen 15%, Gabapentin 10%, Menthol 2%, Camphor 2% 180 gms (1 tube) with 2 refills:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Page(s): 111.

**Decision rationale:** This 72 year old female has complained of low back pain since date of injury 2/27/98. She has been treated with physical therapy, lumbar spine surgery, epidural steroid injections, spinal cord stimulator and medications. The current request is for compound cream Capsaicin 0.025%, Flurbiprofen 15%, Gabapentin 10%, Menthol 2%, Camphor 2%. Per the MTUS guidelines cited above, the use of topical analgesics in the treatment of chronic pain is largely experimental, and when used, is primarily recommended for the treatment of neuropathic pain when trials of first line treatments such as anticonvulsants and antidepressants have failed. There is no such documentation in the available medical records. On the basis of the MTUS guidelines cited above, compound cream: Capsaicin 0.025%, Flurbiprofen 15%, Gabapentin 10%, Menthol 2%, Camphor 2% is not indicated as medically necessary.