

<b>Case Number:</b>	CM15-0017132		
<b>Date Assigned:</b>	02/05/2015	<b>Date of Injury:</b>	04/07/2010
<b>Decision Date:</b>	03/30/2015	<b>UR Denial Date:</b>	01/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/29/2015

### 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:

This 57 year old female sustained a work related injury on 04/07/2010. According to a progress report dated 12/10/2014 the injured worker complained of lumbar spine and bilateral knee pain, right worse than left. Pain was made better with therapy and medications. The injured worker was currently not working. Diagnoses included lumbar strain with facet hypertrophy at L3-L4 and L4-L5, right lower extremity radicular pain, right knee pain status post arthroscopy with residuals, post traumatic arthrosis of the right knee, left knee mild degenerative joint disease, sexual dysfunction due to pain, anxiety, stress and depression, right knee moderate chondromalacia, and right knee mild patellar tendinopathy. Medication included Ibuprofen 800mg tab #60 1 tab by mouth every 8 hours with food. On 01/12/2015, Utilization Review non-certified Flurbiprofen 20%/Cyclobenzaprine 10%/Menthol 4% cream 180 grams. According to the Utilization Review physician, the injured worker was being treated with an oral nonsteroidal anti-inflammatory drug and the addition of a topical nonsteroidal anti-inflammatory drug is not recommended. The topical use of Cyclobenzaprine, menthol and high concentrations of nonsteroidal anti-inflammatory drugs is not recommended. CA MTUS Chronic Pain Medical Treatment Guidelines were referenced. The decision was appealed for an Independent Medical Review.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Flurbiprofen 20%/ Cyclobenzaprine 10%/ Menthol 4% cream, 180gm:** 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 analgesic Page(s): 111-113.

**Decision rationale:** Per the 12/10/14 report the patient presents with lumbar spine and bilateral knee pain, right worse than left. The current request is for FLURBIPROFEN 20%, CYCLOBENZAPRINE 10%, MENTHOL 4% CREAM 180 gm. The RFA is not included. As of 12/18/14 the patient is off work until 02/28/15. The MTUS has the following regarding topical creams (p111, chronic pain section): "There is little to no research to support the use of many of these agents. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended." MTUS, Topical Analgesic page 113 states, "Other muscle relaxants: There is no evidence for use of any other muscle relaxant as a topical product." In this case, the requested compounded topical cream contains Cyclobenzaprine, "a muscle relaxant" that is not approved for topical formulation per guidelines. Therefore, the requested medication is not recommended, and the request IS NOT medically necessary.