

<b>Case Number:</b>	CM15-0112022		
<b>Date Assigned:</b>	06/18/2015	<b>Date of Injury:</b>	12/22/2010
<b>Decision Date:</b>	07/24/2015	<b>UR Denial Date:</b>	05/12/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	06/09/2015

### 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: Texas, California  
 Certification(s)/Specialty: Family Practice

### 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 is a 52 year old female patient who sustained an industrial injury on 12/22/2010. She sustained the injury due to continuous trauma. The diagnoses include bilateral carpal tunnel syndrome left more than right, bilateral De Quervain syndrome and bilateral epicondylitis, improved. Per the doctor's note dated 6/15/2015, she had complaints of bilateral wrists pain. The physical examination revealed right wrist/hand- atrophy of thenar musculature; left wrist/hand- 1 cm atrophy of the left forearm, atrophy of thenar musculature; positive Tinel's and Phalen's test bilaterally and 4+/5 strength bilaterally, decreased sensation in thumb and index finger. Per the doctor's note dated 5/8/15, she had bilateral wrist pain with tingling and numbness. The physical examination revealed tenderness over the bilateral wrists, positive Tinel's, Finkelstein's and Phalen's test bilaterally. Per the doctor's note dated April 28, 2015 she had increasing bilateral wrist and hand pain, improved right elbow pain after an injection, difficulty sleeping, anxiety and depression. The pain was rated a seven out of ten on the visual analogue scale. The objective finding noted that the physical examination was unchanged from the prior visit. Per the orthopedic consultation dated 12/08/2014 she had high blood pressure, chronic pain, anxiety, stress and depression. The medications list include Lidoderm patch, Triamterene/ HCTZ, Norvasc, Synthroid, naproxen, Trazodone and Celexa. She has had electrodiagnostic nerve conduction study on 05/14/2014 which revealed evidence of moderate to severe bilateral left greater, median entrapment neuropathy across the wrists. Treatment to date has included medications, radiological studies, electrodiagnostic studies, injections, physical therapy, acupuncture treatments, wrist splints, biofeedback sessions and a home exercise program. The

treating physician's plan of care included a request for one orthopedic consultation for the bilateral shoulders and carpal tunnel syndrome and Naprosyn 550 mg with one refill.

### **IMR ISSUES, DECISIONS AND RATIONALES**

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

#### **1 orthopedic consultation for bilateral shoulders & CTS: Upheld**

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints, Chapter 11 Forearm, Wrist, and Hand Complaints Page(s): 196, 258, 270, Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ACOEM Practice Guidelines, page 127.

**Decision rationale:** American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, Independent Medical Examinations and Consultations, page 127 was used for this request. Per the cited guidelines, "The occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise." Per the records provided patient had increased bilateral wrist and hand pain. Patient has significant objective findings on the physical examination- tenderness over the bilateral wrists, positive Tinel's, Finkelstein's and Phalen's test bilaterally. Patient has diagnostic studies with abnormal findings. Evaluation with orthopedic is medically appropriate to evaluate bilateral wrists-carpal tunnel syndrome and manage her chronic pain. However, detailed physical examination of the bilateral shoulders with significant objective findings is not specified in the records provided. Rationale for consultation for bilateral shoulder is not specified in the records provided. The medical necessity of 1 orthopedic consultation for bilateral shoulders & CTS, as submitted, is not fully established for this patient at this juncture, based on the records provided. Therefore, this request is not medically necessary.

#### **60 Naprosyn 550mg with 1 refill: Overturned**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDs (non-steroidal anti-inflammatory drugs).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Anti-inflammatory medications page 22; NSAIDs page 67 Naproxen is a NSAID.

**Decision rationale:** CA MTUS page 67 states that NSAIDs are recommended for "Chronic pain as an option for short-term symptomatic relief, recommended at the lowest dose for the shortest period in patients with moderate to severe pain." MTUS also states that "Anti-inflammatories are the traditional first line of treatment, to reduce pain so activity and functional restoration can resume." According to the records provided, patient has had bilateral hand and wrist pain. She has had significant findings on physical examination. NSAIDs are considered first line treatment

for pain and inflammation. The request for 60 Naprosyn 550mg with 1 refill is medically appropriate and necessary for this patient to use as needed to manage her chronic pain.