

Case Number:	CM15-0115564		
Date Assigned:	06/23/2015	Date of Injury:	06/18/2014
Decision Date:	07/28/2015	UR Denial Date:	05/18/2015
Priority:	Standard	Application Received:	06/15/2015

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, Massachusetts
 Certification(s)/Specialty: Preventive Medicine, Occupational Medicine

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 30 year old female with an industrial injury dated 06/18/2014. The injured worker's diagnoses include lumbar sprain sprain/strain with myofascitis, right wrist sprain/strain and psyche complaints: anxiety, depression, insomnia and nervousness. Treatment consisted of diagnostic studies, prescribed medications, and periodic follow up visits. In a progress note dated 03/13/2015, the injured worker reported right wrist and hand pain. The injured worker rated pain a 7/10. The injured worker also complained of intermittent low back pain with pain radiating into the right lower extremity. Objective findings revealed tenderness over the bilateral lumbar paraspinals and quadratus lumborum with spasms. Tenderness over the right forearm and right thenar with bilateral positive Tinel's and Phalen's test were also noted on exam. The treating physician prescribed compound - Flurbiprofen 20%/Baclofen 5%/ Dexamethasone 0.2%/Menthol 2%/Camphor 2%/Capsaicin 0.025%/Hyaluronic acid 0.2% in base cream and compound - Dextromethorphan 10%/Gabapentin 10%/Bupivacaine 5%/ Camphor 2%/Menthol 2% in cream base now under review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Compound - Flurbiprofen 20%/Baclofen 5%/ Dexamethasone 0.2%/Menthol 2%/Camphor 2%/Capsaicin 0.025%/Hyaluronic acid 0.2% in base cream: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesic Page(s): 112-119.

Decision rationale: According to CA MTUS guidelines topical analgesics are largely experimental and are only indicated once first line oral agent for radicular pain such as lyrica or neurontin are shown to be ineffective and if the compounded agents are contraindicated in traditional oral route. There is nothing noted in the provided clinic record that the injured worker is unable to take a first line oral agent for his neuropathic pain. Additionally any compounded product that contains at least one drug that is not recommended is not recommended. Flurbiprofen and baclofen are not recommended as a compounded agent as equivalents can be safely taken orally. Consequently continued use of the above listed compounded agent is not supported at this time. The request is not medically necessary.

Compound - Dextromethorphan 10%/Gabapentin 10%/Bupivacine 5%/Camphor 2%/Menthol 2% in cream base: Upheld

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

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesic Page(s): 112-119.

Decision rationale: According to CA MTUS guidelines topical analgesics are largely experimental and are only indicated once first line oral agent for radicular pain such as lyrica or neurontin are shown to be ineffective and if the compounded agents are contraindicated in traditional oral route. There is nothing noted in the provided clinic record that the injured worker is unable to take a first line oral agent for his neuropathic pain. Additionally any compounded product that contains at least one drug that is not recommended is not recommended. Gabapentin is not recommended as a compounded agent as it can be safely taken orally. Consequently continued use of the above listed compounded agent is not supported at this time. The request is not medically necessary.