

<b>Case Number:</b>	CM15-0128646		
<b>Date Assigned:</b>	07/15/2015	<b>Date of Injury:</b>	12/11/2014
<b>Decision Date:</b>	08/10/2015	<b>UR Denial Date:</b>	05/30/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	07/02/2015

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 48 year old male who sustained an industrial injury to the left shoulder and elbow on 12/11/2014 while lifting and balancing helicopter blades. The injured worker was diagnosed with left shoulder impingement syndrome, left shoulder adhesive tendinitis, left lateral epicondylitis and sleep disturbance. Treatment to date has included diagnostic testing, conservative measures, modified activities, physical therapy (6 sessions) and medications. According to the primary treating physician's progress report on April 20, 2015, the injured worker continues to experience left shoulder and elbow pain. The injured worker also reports loss of sleep due to pain, depression, anxiety and irritability. Examination of the left shoulder demonstrated 3 plus tenderness to palpation of the anterior, posterior shoulder and trapezius with spasm of the trapezius muscle. Range of motion was painful with Neer's, supraspinatus press and Hawkins tests causing pain. The left elbow revealed painful range of motion with 3 plus tenderness to palpation of the lateral elbow and lateral epicondyle. Mill's test produced pain. Dermatome sensation, motor strength and deep tendon reflexes of the bilateral upper extremities were intact. Current medications were not documented. Treatment plan consists of chiropractic therapy, kinetic activities, tennis elbow brace, referral to orthopedic surgeon, sleep study test, and psychiatric/psychological consultation and the current retrospective request for Mentherm ointment (DOS: 4/27/2015).

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Retrospective Methoderm ointment with a date of service of 4/27/2015:** Overturned

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines (1) Medications for chronic pain, p60 (2) Topical Analgesics, p111-113.

**Decision rationale:** The claimant sustained a cumulative trauma work injury in December 2014 and continues to be treated for left shoulder and elbow pain. When seen, he was having constant moderate to severe pain. There was decreased and painful shoulder range of motion with tenderness and muscle spasms. Impingement testing was positive. There was left elbow tenderness with decreased and painful range of motion. Methoderm gel is a combination of methyl salicylate and menthol. Menthol and methyl salicylate are used as a topical analgesic in over the counter medications such as Ben-Gay or Icy Hot. They work by first cooling the skin then warming it, providing a topical anesthetic and analgesic effect which may be due to interference with transmission of pain signals through nerves. Guidelines address the use of capsaicin which is believed to work through a similar mechanism and is recommended as an option in patients who have not responded or are intolerant to other treatments. Additionally, methyl salicylate metabolizes into salicylates, including salicylic acid, a non-steroidal anti-inflammatory medication. In this case, the claimant has chronic pain and has only responded partially to other conservative treatments. He has localized peripheral pain that could be amenable to topical treatment. Therefore, Methoderm was medically necessary.