

Case Number:	CM15-0173300		
Date Assigned:	09/15/2015	Date of Injury:	09/03/2011
Decision Date:	10/15/2015	UR Denial Date:	08/20/2015
Priority:	Standard	Application Received:	09/02/2015

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: California, Indiana, New York
 Certification(s)/Specialty: Internal 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 63 year old male, who sustained an industrial injury on 09-03-2011. He has reported subsequent bilateral shoulder, right arm and left elbow pain and was diagnosed with lateral epicondylitis, cervicgia and shoulder pain. Treatment to date has included oral and topical pain medication which were noted to provide some pain relief. Methyl Salicylate was noted as being prescribed since at least 03-09-2015. In a progress note dated 07-20-2015, the injured worker reported bilateral shoulder, right arm and left elbow pain. The injured worker reported that Tramadol and Methyl Salicylate helped to relieve pain temporarily but reported stomach burning from Tramadol despite lowering the dose as well as difficulties sleeping and anxiety. Pain was rated as 5-6 out of 10 with pain medication and 7-8 out of 10 without pain medication. Objective examination findings showed forward flexion of 100 degrees of the right shoulder, abduction of 110 degrees, external rotation of 40 degrees, internal rotation of 50 degrees and extension of 15 degrees, tenderness to palpation over the posterior right shoulder and tenderness to palpation of the lateral epicondyle of the left elbow. Tramadol was continued and the injured worker was continued on Omeprazole. The injured worker's work status was noted as having no restrictions but the injured worker was noted to be retired. A request for authorization of Menthoderm, quantity of 1 and Lidopro topical analgesic was submitted.

IMR ISSUES, DECISIONS AND RATIONALES

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

Menthoderm, Qty 1: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Topical Analgesics.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, Menthoderm #1 is not medically necessary. Topical analgesics are largely experimental with few controlled trials to determine efficacy and safety. They are primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not recommended is not recommended. Methyl salicylate is significantly better than placebo in acute and chronic pain, but especially acute pain. Topical salicylate was significantly better than placebo but larger more valid studies without significant effect. In this case, the injured worker's working diagnoses are lateral epicondylitis; cervicgia; and shoulder pain. The date of injury is September 3, 2011. The request for authorization is dated July 21, 2015. Utilization review references a May 11, 2015 progress note. The medical record contains 17 pages. According to a May 11, 2015 progress note, the injured worker's subjective complaints include bilateral shoulder pain, right arm pain and left elbow pain. Documentation indicates there is temporary improvement with the methyl salicylate. Pain score is 6/10. The treatment plan references Lidopro cream, but does not discuss or reference Menthoderm. There is no documentation of failed first-line treatment with antidepressants or anticonvulsants. There are no subjective symptoms or objective clinical findings compatible with a neuropathic etiology. Based on clinical information medical record, peer-reviewed evidence-based guidelines, no documentation indicating neuropathic symptoms or signs, no objective functional improvement from prior use of methyl salicylate and no documentation of failed first-line treatment with antidepressants and anticonvulsants, Menthoderm #1 is not medically necessary.

LidoPro topical analgesic: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Topical Analgesics. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain section, Topical Analgesics.

Decision rationale: Pursuant to the Chronic Pain Medical Treatment Guidelines and the Official Disability Guidelines, LidoPro topical analgesic is not medically necessary. Topical analgesics are largely experimental with few controlled trials to determine efficacy and safety. They are primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Any compounded product that contains at least one drug (or drug class) that is not

recommended is not recommended. Lidopro contains Capsaicin 0.0325%, lidocaine 4.5% and methyl salicylate 27.5%. Other than Lidoderm, no other commercially approved topical formulation of lidocaine whether cream, lotions or gels are indicated for neuropathic pain. Capsaicin is generally available as a 0.025% formulation. There have been no studies of a 0.0375% formulation and there is no current indication that an increase over 0.025% formulation would provide any further efficacy. In this case, the injured worker's working diagnoses are lateral epicondylitis; cervicalgia; and shoulder pain. The date of injury is September 3, 2011. The request for authorization is dated July 21, 2015. Utilization review references a May 11, 2015 progress note. The medical record contains 17 pages. According to a May 11, 2015 progress note, the injured worker's subjective complaints include bilateral shoulder pain, right arm pain and left elbow pain. Documentation indicates there is temporary improvement with the methyl salicylate. Pain score is 6/10. The treatment plan references Lidopro cream, but does not discuss or reference Methoderm. There is no documentation of failed first-line treatment with antidepressants or anticonvulsants. There are no subjective symptoms or objective clinical findings compatible with a neuropathic etiology. Capsaicin 0.0375% is not recommended. Any compounded product that contains at least one drug (Capsaicin 0.0375%) that is not recommended is not recommended. Based on clinical information and medical records, peer-reviewed evidence-based guidelines and no documentation fail first-line treatment with antidepressants or anticonvulsants, LidoPro topical analgesic is not medically necessary.