

Case Number:	CM15-0175169		
Date Assigned:	09/16/2015	Date of Injury:	08/19/1998
Decision Date:	10/16/2015	UR Denial Date:	08/24/2015
Priority:	Standard	Application Received:	09/04/2015

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: Arizona, 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:

The injured worker is a 63-year-old female, who sustained an industrial injury on 8-19-1998. The injured worker was diagnosed as having cervical disc displacement without myelopathy, lumbago, cervical disc degenerations, lumbar lumbosacral disc disease, lumbar disc displacement without myelopathy, and depression. The request for authorization is for one prescription of Lidoderm 5% patch #30. The UR dated 8-24-2015: non-certified the request for one prescription of Lidoderm 5% patches #30. On 2-5-2015, she rated her pain to be 6 in severity. Objective findings revealed her to have tenderness in the neck, and thoracic and lumbar spines. Testing revealed a negative straight leg raise and spurling. On 7-17-2015, she reported pain in the neck and bilateral trapezius. Objective findings revealed decreased range of motion in the neck, increased muscle tone of the trapezius and tenderness. On 8-14-2015, she reported pain neck and myofascial pain to the bilateral trapezius areas. Trigger point injections were given approximately 3 months prior. She is noted to have found some benefit from massage therapy. She reported oral medications cause her constipation and nausea so she would like to continue with topical medications. She indicated having had a rash with the use of Flector patches. Objective findings revealed no abnormalities to her gait, decreased range of motion to the neck, increased muscle tone of the trapezius, and tenderness in the area. A cervical epidural steroid injection done in April 2014 was noted to have given her 60-70 percent relief. The treatment and diagnostic testing to date has included: home exercise program, medications, magnetic resonance imaging and x-ray (2004), massage therapy, acupuncture, and chiropractic treatment, trigger point injections (approximately May 2015), ergonomic work evaluation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lidoderm 5% patch Qty 30: 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 rationale: According to the MTUS guidelines, topical analgesics are recommended as an option as indicated below. They are largely experimental in use with few randomized controlled trials to determine efficacy or safety. Primarily recommended for neuropathic pain when trials of antidepressants and anticonvulsants have failed. Lidocaine is recommended for localized peripheral pain after there has been evidence of a trial of first-line therapy (tri-cyclic or SNRI anti-depressants or an AED such as gabapentin or Lyrica). The FDA for neuropathic pain has designated Lidoderm for orphan status. Lidoderm is also used off-label for diabetic neuropathy. In this case, the claimant did not have the above diagnoses. The claimant was on numerous other oral analgesics and muscle relaxants without reduction in use. The request for continued and long-term use of Lidoderm patches as above is not medically necessary.