

Case Number:	CM15-0178951		
Date Assigned:	09/21/2015	Date of Injury:	08/22/2012
Decision Date:	10/22/2015	UR Denial Date:	08/12/2015
Priority:	Standard	Application Received:	09/11/2015

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 48 year old female, who sustained an industrial injury on August 22, 2012. She reported injuries to her left lower extremity, left leg and left knee. On July 13, 2015 the injured worker reported that her left knee pain remained unchanged and she had associated swelling. She reported right ankle pain. The injured worker rated her pain an 8 on a 10-point scale. Her previous pain rating on June 15, 2015 was also 8 on a 10-point scale. On physical examination the injured worker had tenderness to palpation in the lateral and medial side of the patella and she had an effusion of the left knee. Her left knee range of motion was limited due to pain. Her medication regimen included voltaren gel since at least October 27, 2014, Ketoprofen, Gabapentin 300 mg and Omeprazole 20 mg. An MRI of the left knee on July 14, 2015 revealed tricompartmental osteoarthritis most prominent in the patellofemoral compartment with moderate grade diffuse chondral loss in the medial patellar facet, and low grade partial thickness intrasubstance tearing in the distal portion of the patellar tendon with a background of tendinosis. Treatment to date has included left knee arthroscopic surgeries, physical therapy with no benefit, TENS unit with improvement, NSAIDS, opioid medications, and topical pain medications. The injured worker was diagnosed as having pain in joint of the lower leg, effusion of joint in the lower leg, chondromalacia of the patella and medial meniscus tear. A request for authorization for Voltaren Gel 1 percent apply 4 gm bid #1 tube was received on August 6, 2015. On August 12, 2015, the Utilization Review physician determined Voltaren Gel 1 percent apply 4 gm bid #1 tube was not medically necessary.

IMR ISSUES, DECISIONS AND RATIONALES

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

Voltaren gel 1% apply 4gm twice a day quantity 1 tube: 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 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. Voltaren gel is a topical analgesic. It is indicated for relief of osteoarthritis pain in joints that lend themselves to topical treatment (ankle, elbow, foot, hand, knee, and wrist). It has not been evaluated for treatment of the spine, hip or shoulder. It is recommended for short-term use (4-12 weeks) for arthritis. In this case, the claimant had been on the gel for several months along with oral NSAIDS (Ketoprofen). Topical NSAIDS can reach systemic levels similar to oral NSAIDS increasing the risk of GI and renal disease. Although there was a meniscal injury, there was no mention of arthritis. There are diminishing effects after 2 weeks. The Voltaren gel is not medically necessary.