

<b>Case Number:</b>	CM15-0179682		
<b>Date Assigned:</b>	09/21/2015	<b>Date of Injury:</b>	05/01/2002
<b>Decision Date:</b>	10/23/2015	<b>UR Denial Date:</b>	09/03/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	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 58 year old female, who sustained an industrial injury on May 01, 2002. The injured worker was diagnosed as having degenerative disc disease of the lumbar spine, post lumbar laminectomy syndrome, and myofascial spasms. Treatment and diagnostic studies to date has included home exercise program, medication regimen, and laboratory studies. In a progress note dated August 26, 2015 the treating physician reports complaints of constant pain to the low back that radiates to the posterior left thigh. Examination on August 26, 2015 was revealing for bilateral mid to low back spasms, tenderness to the lumbar spine, tenderness to the sacroiliac joint on the right, and positive Lasegue's testing bilaterally. On August 26, 2015 the injured worker's current medication regimen included Duragesic, Oxycodone, Oxycontin, Cyclobenzaprine (Flexeril), Lisinopril, Macrobid, Prilosec, and Xanax with the treating physician noting the use of the injured worker's medication regimen assisting with managing the injured worker's pain and "improve" the injured worker's function. The treating physician also noted that the medication of Flexeril assisted with the radiating pain. On August 26, 2015 the injured worker's current pain level to be rated a 6 on a visual analog scale, with the maximum pain level of a 9 on a visual analog scale, and a pain level of a 5 on a visual analog scale with the use of her medication regimen. On August 26, 2015 the treating physician requested the medication Cyclobenzaprine 7.5mg with a quantity of 90 noting current use of this medication as noted above. On September 03, 2015 the Utilization Review determined the request for Cyclobenzaprine 7.5mg with a quantity of 90 to be non-certified.

## IMR ISSUES, DECISIONS AND RATIONALES

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

**Cyclobenzaprine 7.5mg #90:** 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): Cyclobenzaprine (Flexeril).

**Decision rationale:** According to the MTUS guidelines, Cyclobenzaprine (Flexeril) is more effective than placebo for back pain. It is recommended for short course therapy and has the greatest benefit in the first 4 days suggesting that shorter courses may be better. Those with fibromyalgia were 3 times more likely to report overall improvement, particularly sleep. Treatment should be brief. There is also a post-op use. The addition of Cyclobenzaprine to other agents is not recommended. The claimant had been on Flexeril along with opioids. The amount requested exceeds the short course recommended above. Continued use of Flexeril (Cyclobenzaprine) #90 is not medically necessary.