

Case Number:	CM15-0046460		
Date Assigned:	03/19/2015	Date of Injury:	04/29/2014
Decision Date:	04/23/2015	UR Denial Date:	03/03/2015
Priority:	Standard	Application Received:	03/11/2015

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: 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 60 year old female, who sustained an industrial injury on April 29, 2014. She has reported right shoulder pain and left knee pain. Diagnoses have included rotator cuff sprain/strain, right shoulder rotator cuff tear, and left knee arthralgia. Treatment to date has included medications, physical therapy, and imaging studies. A progress note dated January 26, 2015 indicates a chief complaint of right shoulder pain and left knee pain. The treating physician documented a plan of care that included medications and orthopedic follow up.

IMR ISSUES, DECISIONS AND RATIONALES

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

Lidopro topical ointment: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints, Chapter 13 Knee Complaints, Chronic Pain Treatment Guidelines. Decision based on Non-MTUS Citation Official Disability Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Topical analgesics Page(s): 111-113. 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 ointment is not medically necessary. Lidopro contains Capsaicin 0.0375%, Lidocaine, Menthol, Methyl salicylate. Topical analgesics are largely experimental with you 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. Capsaicin is recommended only as an option in patients have not responded or are intolerant to other treatments. 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. Other than Lidoderm, no other commercially approved topical formulation of lidocaine with a cream, lotions or gels are indicated for neuropathic pain. In this case, the injured worker's working diagnoses are right shoulder rotator cuff tear; and left knee arthralgia. Subjectively, the injured worker complains of tingling and burning around the right shoulder. Objectively, there is no neurologic evaluation with the exception of a sensory examination that was intact. Documentation from a November 12, 2014 progress note shows the injured worker was using ketoprofen topical cream. Reportedly, ketoprofen topical cream was helping. In a January 26, 2015 progress note, Lidopro was started. Capsaicin 0.0375% is not recommended. Lidocaine in cream/ointment form is not recommended. Any compounded product that contains at least one drug (Capsaicin 0.0375% and lidocaine cream) that is not recommended is not recommended. Consequently, Lidopro cream is not recommended. Based on the clinical information in the medical record and the peer-reviewed evidence-based guidelines, Lidopro topical ointment is not medically necessary.