

Case Number:	CM15-0046576		
Date Assigned:	03/18/2015	Date of Injury:	12/01/2005
Decision Date:	04/23/2015	UR Denial Date:	03/06/2015
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 61-year-old female, who sustained an industrial injury on 12/1/05. She has reported injury to bilateral feet from repeatedly getting in and out of a truck and landing on her feet and working as a flagger and standing all day without a break. The diagnoses have included neuroma of bilateral feet. Treatment to date has included medications, surgery, injections and orthotics. Surgery has included removal of 2 neuromas from left foot. Currently, as per the physician progress note dated 10/2/14, the injured worker was for follow up visit regarding the neuromas in her foot. She was evaluated by another physician and offered an injection or surgical approach. She declined the injection and is unsure about having surgery. She states that the left foot has never settled down following the injections and procedures done on it. She discussed orthotic shoes and is requesting a referral to have orthotic shoes designed for her. The current medications included Levoxyl and Zyrtec. The exam of the bilateral feet revealed swelling in the right foot in between the first and second metatarsals and scars and changes on the left foot related to prior surgical procedures. The Treatment Plan included conditioning and mobility, special shoes by cutting edge orthotics, and return in 1 month. The requested treatment includes Retrospective: Transdermal Compound Medication: Capsaicin/Menthol/Camphor/Tramadol (DOS: 10/30/2014).

IMR ISSUES, DECISIONS AND RATIONALES

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

Retrospective: Transdermal Compound Medication: Capsaicin/Menthol/Camphor/ Tramadol (DOS: 10/30/2014): Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Salicylate topicals; Topical Analgesics Page(s): 105; 111-113.

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, retrospective transdermal compound medication Capsaicin 0.0375%, menthol, 10% camphor and Tramadol date service October 30, 2014 is not medically necessary. 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. In this case, the injured worker's working diagnoses are chronic bilateral foot pain; status post surgery neuromas left foot; new neuroma left foot; and history 2 neuromas right foot. 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. There is no documentation of a failed trial with antidepressants and anticonvulsants in the medical record. Consequently, absent guideline recommendations to support Capsaicin 0.0375% with evidence of a failed clinical trial with antidepressants and anticonvulsants, retrospective transdermal compound medication Capsaicin 0.0375%, menthol, 10% camphor and Tramadol date service October 30, 2014 is not medically necessary.