

Case Number:	CM15-0094033		
Date Assigned:	05/20/2015	Date of Injury:	07/07/2005
Decision Date:	06/26/2015	UR Denial Date:	04/21/2015
Priority:	Standard	Application Received:	05/15/2015

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: Texas, New York, California
 Certification(s)/Specialty: Preventive Medicine, Occupational 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 applicant is a represented [REDACTED] beneficiary who has filed a claim for chronic pain syndrome reportedly associated with an industrial injury of July 7, 2005. In a Utilization Review report dated April 20, 2015, the claims administrator failed to approve a request for Tigan. The claims administrator referenced a variety of historical Utilization Review reports, along with a progress note dated March 20, 2015. The claims administrator stated that the attending provider failed to document symptoms of nausea on around the date in question. The applicant's attorney subsequently appealed. In a RFA form dated April 10, 2015, Lexapro, Tigan, losartan, and metformin were endorsed without much in the way of supporting commentary. In a January 9, 2015 progress note, handwritten, difficult to follow, not entirely legible, the applicant reported ongoing issues with chronic pain, depression, and anxiety. The note was handwritten, difficult to follow, and not entirely legible. Tigan on a p.r.n. basis for nausea, Lexapro, losartan, metformin, Wellbutrin, tizanidine, Valium, and AndroGel were endorsed. The applicant had been deemed "permanently disabled," it was acknowledged. While the attending provider stated that Tigan had been given on p.r.n. basis for nausea, there was, however, no explicit mention of the applicant's having issues with nausea in the subjective section of the note.

IMR ISSUES, DECISIONS AND RATIONALES

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

Tigan 300mg #60: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines, Pain - Antiemetics for opioid nausea.

MAXIMUS guideline: Decision based on MTUS ACOEM Chapter 3 Initial Approaches to Treatment Page(s): 47, Chronic Pain Treatment Guidelines Functional Restoration Approach to Chronic Pain Management Page(s): 7. Decision based on Non-MTUS Citation Food and Drug Administration INDICATIONS AND USAGE Tigan is indicated for the treatment of postoperative nausea and vomiting and for nausea associated with gastroenteritis.

Decision rationale: No, the request for Tigan, an antiemetic medication, was not medically necessary, medically appropriate, or indicated here. Pages 7 and 8 of the MTUS Chronic Pain Medical Treatment Guidelines stipulate that an attending provider using a drug for non-FDA labeled purposes has the responsibility to be well informed regarding usage of the same and should, furthermore, furnish compelling evidence to support such usage. The MTUS Guideline in ACOEM Chapter 3, page 47 further stipulates that an attending provider should incorporate some discussion of efficacy of medication for the particular condition for which it has been prescribed into his choice of recommendations so as to ensure proper usage. Here, however, the attending provider's documentation was thinly and sparsely developed and comprised, in large part, handwritten progress notes. It was not clearly stated for what purpose, diagnosis, and/or symptoms Tigan had been endorsed. While the Food and Drug Administration (FDA) notes that Tigan is indicated in the treatment of nausea and/or vomiting associated with postoperative nausea and/or nausea and vomiting associated with gastroenteritis, in this case, however, there was no mention of the applicant's having had recent surgery. There was no mention of the applicant's having had a bout of gastroenteritis. The attending provider's progress notes, furthermore, did not explicitly allude to the applicant's personally experiencing symptoms of nausea, it was further noted. Therefore, the request was not medically necessary.