

Case Number:	CM15-0097723		
Date Assigned:	05/28/2015	Date of Injury:	09/27/2004
Decision Date:	07/01/2015	UR Denial Date:	04/26/2015
Priority:	Standard	Application Received:	05/20/2015

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: Iowa, Illinois, Hawaii

Certification(s)/Specialty: Preventive Medicine, Occupational Medicine, Public Health & General Preventive 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:

This 33 year old male sustained an industrial injury to the neck and back on 9/27/04. Previous treatment included magnetic resonance imaging, physical therapy, acupuncture, epidural steroid injections, psychiatric care and medications. Magnetic resonance imaging lumbar spine (2/26/15) showed broad based disc bulge with disc protrusion. In a visit note dated 4/20/15, the injured worker complained of ongoing low back pain with radiation to bilateral lower extremity associated with increased leg weakness. The injured worker used a cane to help with ambulation. The injured worker developed right wrist pain from using the cane. The injured worker also complained of constipation, anxiety, depression and hallucinations. Physical exam was remarkable for lumbar spine with spasm and guarding, positive right straight leg raise, decreased sensation in the right L4-5 distribution and 4/5 right ankle strength. Current medications included Metamucil, Senna, Docusate Sodium, Morphine Sulfate ER, Tizanidine, Topiramate, Abilify, Cymbalta, Geodon and Colace. Current diagnoses included lumbar disc displacement without myelopathy, depression, lumbar spine degenerative disc disease, lumbar stenosis, cervical disc displacement. The treatment plan included prescriptions for Morphine Sulfate, Tizanidine and Topiramate and a replacement right wrist brace.

IMR ISSUES, DECISIONS AND RATIONALES

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

Metamucil Powder with 3 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioid Page(s): 77. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Opioid-induced constipation treatment.

Decision rationale: Docusate is a stool softener. This patient is undergoing treatment with an opioid. Opioids can commonly cause constipation and treatment to prevent constipation is recommended. Official Disability Guidelines states that first line treatment should include physical activity, appropriate hydration by drinking enough water, and advising the patient to follow a proper diet, rich in fiber and some laxatives may help to stimulate gastric motility. Other over-the-counter medications can help loosen otherwise hard stools, add bulk, and increase water content of the stool. The treating physician does not document what first line treatments have been tried and what the results of those treatments are. Additionally, no quantitative or qualitative description of bowel movement frequency/difficulty was provided either pre or post constipation treatment education by the physician, which is important to understand if first line constipation treatment was successful. Additionally, it appears this patient is being considered for surgery, therefore the necessity of 3 refills has not been established. The previous reviewer modified the request to one month supply. As such, the request for Metamucil Powder with 3 refills is not medically indicated at this time.

Senokot-S #120 with 3 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioid Page(s): 77. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Opioid-induced constipation treatment and Other Medical Treatment Guidelines UpToDate.com, docusate and senna.

Decision rationale: Docusate and sennoside are stool softeners and laxatives, respectively. This patient is undergoing treatment with Norco, which is an opioid. The length of time this patient has been on opioids is unknown. Opioids can commonly cause constipation and treatment to prevent constipation is recommended. Official Disability Guidelines states that first line treatment should include physical activity, appropriate hydration by drinking enough water, and advising the patient to follow a proper diet, rich in fiber and some laxatives may help to stimulate gastric motility. Other over-the-counter medications can help loosen otherwise hard stools, add bulk, and increase water content of the stool. Uptodate states "Patients who respond poorly to fiber, or who do not tolerate it, may require laxatives other than bulk forming agents." Additionally, "There is little evidence to support the use of surfactant agents in chronic constipation. Stool softeners such as docusate sodium (eg, Colace) are intended to lower the

surface tension of stool, thereby allowing water to more easily enter the stool. Although these agents have few side effects, they are less effective than other laxatives." The treating physician does not document any attempts at first line therapy and does not document the results of the first line therapy. The treating physician does not document what first line treatments have been tried and what the results of those treatments are. Additionally, no quantitative or qualitative description of bowel movement frequency/difficulty was provided either pre or post constipation treatment education by the physician, which is important to understand if first line constipation treatment was successful. Additionally, it appears this patient is being considered for surgery, therefore the necessity of 3 refills has not been established. Previous reviewer modified the request to a one month supply. As such, the request for Senokot-S #120 with 3 refills is not medically indicated at this time.

Docusate Sodium 100mg #120 with 3 refills: Upheld

Claims Administrator guideline: Decision based on MTUS Chronic Pain Treatment Guidelines.

MAXIMUS guideline: Decision based on MTUS Chronic Pain Treatment Guidelines Opioids Page(s): 77. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Pain (Chronic), Opioid-induced constipation treatment and Other Medical Treatment Guidelines UpToDate.com, docusate and senna.

Decision rationale: Docusate and sennoside are stool softeners and laxatives, respectively. This patient is undergoing treatment with Norco, which is an opioid. The length of time this patient has been on opioids is unknown. Opioids can commonly cause constipation and treatment to prevent constipation is recommended. Official Disability Guidelines states that first line treatment should include physical activity, appropriate hydration by drinking enough water, and advising the patient to follow a proper diet, rich in fiber and some laxatives may help to stimulate gastric motility. Other over-the-counter medications can help loosen otherwise hard stools, add bulk, and increase water content of the stool. Uptodate states "Patients who respond poorly to fiber, or who do not tolerate it, may require laxatives other than bulk forming agents." Additionally, "There is little evidence to support the use of surfactant agents in chronic constipation. Stool softeners such as docusate sodium (eg, Colace) are intended to lower the surface tension of stool, thereby allowing water to more easily enter the stool. Although these agents have few side effects, they are less effective than other laxatives." The treating physician does not document any attempts at first line therapy and does not document the results of the first line therapy. The treating physician does not document what first line treatments have been tried and what the results of those treatments are. Additionally, no quantitative or qualitative description of bowel movement frequency/difficulty was provided either pre or post constipation treatment education by the physician, which is important to understand if first line constipation treatment was successful. Additionally, it appears this patient is being considered for surgery, therefore the necessity of 3 refills has not been established. The previous reviewer modified the request to a one month supply. As such, the request for Docusate Sodium 100mg #120 with 3 refills is not medically indicated at this time.