

<b>Case Number:</b>	CM15-0099010		
<b>Date Assigned:</b>	06/01/2015	<b>Date of Injury:</b>	07/08/2008
<b>Decision Date:</b>	06/30/2015	<b>UR Denial Date:</b>	04/28/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	05/22/2015

### 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: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### 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 51 year old male injured worker suffered an industrial injury on 07/08/2008. The diagnoses included lumbago, lumbar post-laminectomy syndrome and thoracic or lumbosacral radiculitis. The injured worker had been treated with physical therapy, tractions, acupuncture, TENS, medications and epidural steroid injections. On 4/21/2015 the treating provider reported the epidural steroid injections provided 75% reduction in pain to the right leg along with reduced intensity of back pain. Along with pain, there was weakness in the lower extremities. The treatment plan included Duexis.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Duexis 800-26.6mg; one tab bid quantity: 60 refills: 1:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 12 Low Back Complaints Page(s): 287-288, Chronic Pain Treatment Guidelines NSAIDS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG), Pain, Duexis.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines NSAIDS, specific drug list & adverse effects, p 68-71. Decision based on Non-MTUS Citation Duexis prescribing information.

**Decision rationale:** The claimant sustained a work injury in July 2008 and continues to be treated for repeat back pain. When seen, there had been a 75% improvement after an epidural injection. Pain was rated at 4/10. Physical examination findings included decreased lumbar spine range of motion with positive straight leg raising. There were tight muscle bands in the paraspinal muscles. There was decreased lower extremity sensation. Medications prescribed are documented as including Duexis as well as omeprazole. Duexis is a combination of ibuprofen 800 mg and famotidine 26.6 mg. Oral NSAIDs (nonsteroidal anti-inflammatory medications) are recommended for treatment of chronic persistent pain. Dosing of ibuprofen should not exceed 3200 mg/day. Guidelines recommend an assessment of GI symptoms and cardiovascular risk when NSAIDs are used. The claimant does not have identified risk factors for a GI event. The claimant is under age 65 and has no history of a peptic ulcer, bleeding, or perforation. He is taking a non-steroidal antiinflammatory medication at a dose consistent with guideline recommendations. There is no documented history of dyspepsia secondary to non-steroidal anti-inflammatory medication therapy. In this clinical scenario, guidelines do not recommend that an H2-receptor blocker such as famotidine be prescribed. Omeprazole, a proton pump inhibitor is also being prescribed which is also not medically necessary and is duplicative. Therefore, prescribing Duexis was not appropriate or medically necessary.