

<b>Case Number:</b>	CM14-0155684		
<b>Date Assigned:</b>	09/25/2014	<b>Date of Injury:</b>	09/14/2007
<b>Decision Date:</b>	11/06/2014	<b>UR Denial Date:</b>	09/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/23/2014

### 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. The expert reviewer is Board Certified in Occupational Medicine and is licensed to practice in California. 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/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### 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] employee who has filed a claim for chronic low back pain, chronic knee pain, and chronic neck pain syndrome reportedly associated with an industrial injury of September 14, 2007. Thus far, the applicant has been treated with the following: Analgesic medications; earlier cervical spine surgery; earlier knee surgery; epidural steroid injection therapy; earlier lumbar spine surgery; subsequent lumbar fusion revision; and unspecified amounts of physical therapy over the course of the claim. In a Utilization Review Report dated August 27, 2014, the claims administrator denied a request for several topical compounded agents. The applicant's attorney subsequently appealed. In a December 23, 2014 progress note, the applicant was placed off of work, on total temporary disability. Several topical compounded medications were issued along with Flexeril, Prilosec, tramadol, and Norco. Authorization was sought for further knee surgery.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**TGHOT:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM, Chronic Pain Treatment Guidelines Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

**Decision rationale:** One of the ingredients in the compound is gabapentin. However, as noted on page 113 of the MTUS Chronic Pain Medical Treatment Guidelines, gabapentin is not recommended for topical compound formulation purposes. Since one or more ingredients in the compound is not recommended, the entire compound is not recommended, per page 111 of the MTUS Chronic Pain Medical Treatment Guidelines. It is further noted that the applicant's ongoing usage of several first-line oral pharmaceuticals, including tramadol, Flexeril, etc., effectively obviates the need for the largely experimental topical compound at issue. Therefore, the request was not medically necessary.

**FlurFlex:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM, Chronic Pain Treatment Guidelines Topical Analgesics.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Topical Analgesics Page(s): 111-113.

**Decision rationale:** One of the ingredients in the compound is Flexeril, a muscle relaxant. However, as noted on page 113 of the MTUS Chronic Pain Medical Treatment Guidelines, muscle relaxants such as Flexeril are not recommended for topical compound formulation purposes. Since one or more ingredients in the compound is not recommended, the entire compound is not recommended, per page 111 of the MTUS Chronic Pain Medical Treatment Guidelines. It is further noted that, as with the other topical compounds, the applicant's ongoing usage of several first-line oral pharmaceuticals, including Norco, tramadol, Flexeril, etc., effectively obviates the need for the largely experimental compound at issue. Therefore, the request was not medically necessary.