

<b>Case Number:</b>	CM14-0173319		
<b>Date Assigned:</b>	10/24/2014	<b>Date of Injury:</b>	03/01/2010
<b>Decision Date:</b>	11/25/2014	<b>UR Denial Date:</b>	09/22/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/20/2014

### 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:

There were 250 pages provided for this review. The application for independent medical review was dated October 5, 2014. It was for a Flector patch. There was a review that was done on September 22, 2014. Two items were requested. One was for Neurontin and the other was the Flector patch. Only the Neurontin was certified. Per the records provided, she is described as a 60-year-old female born on November 14, 1953 from [REDACTED] who was injured on March 1, 2010. The left shoulder, arm, left wrist, cervical spine, and possible left carpal tunnel syndrome and/or left cubital tunnel syndrome were the result. Prior approved services included medication, strength home exercise program, topical ointment, left shoulder MR arthrogram, referral to pain management, urine drug screens, consultation regarding the left shoulder, left shoulder subacromial bursa injection an orthopedic follow-up. The last imaging study of the neck was from 2012. No prior surgical procedures were noted. She continued with moderate constant left shoulder pain and stiffness in moderate intermittent left elbow pain. The medicines at as of November 2013 included Duragesic ointment, RelA fen, aspirin, atenolol, Cosco, isosorbide dinitrate, and simvastatin. There were shoulder range of motion deficits. On September 13, 2014, there was a fax for the quantity of the Flector patches described. As of June 30 the patient still have pain in the left shoulder and back. The diagnosis was cervical radiculitis and cervical myofascial sprain strain.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Flector patch quantity 1.00:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines Treatment in workers/compensation 11th edition, 2013, Pain (Chronic) Chapter (3/15/13).

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation ODG) Pain section, under Flector

**Decision rationale:** Regarding Flector patches, the ODG notes in the pain section: Not recommended as a first-line treatment. It is not clear what other agents had been exhausted before moving to this patch. Further, the Flector patch is FDA indicated for acute strains, sprains, and contusions. (FDA, 2007), not for chronic issues. The significant side effects noted in the 12/07/09 the FDA warnings, are not addressed. It is not clear this risk has been addressed in this case with measurements of transaminases periodically in patients receiving long-term therapy with diclofenac. Also, the benefit of topical NSAIDS is good for about two weeks, and studies are silent on longer term usage, therefore a long term usage as in this case is not supported. There simply is no data that substantiate Flector efficacy beyond two weeks. This request was appropriately non-certified.