

Case Number:	CM13-0024155		
Date Assigned:	11/20/2013	Date of Injury:	03/21/2012
Decision Date:	01/13/2014	UR Denial Date:	09/05/2013
Priority:	Standard	Application Received:	09/13/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Family Practice, has a subspecialty in ABPM 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 physician 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:

This case involves a male claimant who sustained a spinal injury, due to a fall on 3/21/12. This resulted in traumatic brain injury, spinal injury, loss of cremasteric reflex, erectile dysfunction and episodic urinary retention. Claimant has had nocturia and has failed Flomax. He is noted to have a penile implant for erectile dysfunction. He has an indwelling catheter and has an impaired urinary stream when removed. A request by his treating urologist was made on 7/29/13 for flexible cystoscopy, complex cystometrogram with LLP, and cystogram, as well as enrollment in 5-phosphodiesterase inhibitor for erectile dysfunction. A progress note on 9/10/13 indicated that the patient had seen an Urologist, who recommended a bladder tent and bladder ultrasound.

IMR ISSUES, DECISIONS AND RATIONALES

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

Flexible cystoscopy, complex cystometrogram with LLP, and cystogram: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.guideline.gov/content.aspx?id=14824&search=flexible+cystoscopy>, Genital trauma, In: Guidelines on urological trauma..

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Winters JC, Dmochowski RR, Goldman HB, Herndon CD, Kobashi KC, Kraus SR, Lemack GE, Nitti VW, Rovner ES, Wein AJ. Adult urodynamics:

American Urological Association (AUA)/Society of Urodynamics, Female Pelvic Medicine & Urogenital Reconstruction (SUFU) guideline.

Decision rationale: The American Urologic Society indicates that clinicians should perform a complex cystometrogram (CMG) during initial urological valuation of patients with relevant neurological conditions with or without symptoms and as part of ongoing follow-up when appropriate. In patients with other neurological diseases, physicians may consider CMG as an option in the urological evaluation of patients with lower urinary tract symptoms (LUTS). Based on the above guidelines and request from the ordering urologist, the above studies are within the standard of care. The request for flexible cystoscopy, complex cystometrogram with LLP, and cystogram is medically necessary and appropriate.