

<b>Case Number:</b>	CM13-0041597		
<b>Date Assigned:</b>	12/20/2013	<b>Date of Injury:</b>	11/10/2000
<b>Decision Date:</b>	05/06/2014	<b>UR Denial Date:</b>	10/02/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/29/2013

### 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 Orthopedic Surgery 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 claimant is a 57-year-old gentleman who was injured on November 10, 2000 with initial mechanism of injury unclear. The clinical records for review include indication of multiple orthopedic injuries and subsequent surgeries since time injury. He is noted to be status post multiple prior right knee arthroscopies as well as three prior micro-discectomies, an L5-S1 fusion with a second fusion in the form of an extension from the L2 through S1 level and a third fusion related procedure in the form of hardware removal. The claimant is also noted to be status post multiple prior right elbow procedures. At present, there are subjective complaints of low back pain, thoracic pain and neck complaints. The claimant was noted to be with underlying sexual dysfunction for which a urology consultation had been recommended. Prior reports of clinical records indicate that he had sought urology consultation. At present, without documentation of other urologic findings, there is a request for further consultation in regards to this claimant's course of care.

### IMR ISSUES, DECISIONS AND RATIONALES

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

#### **1 UROLOGIST CONSULTATION:** Upheld

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 9 Shoulder Complaints Page(s): 196.

**MAXIMUS guideline:** Decision based on MTUS ACOEM Page(s): 127.

**Decision rationale:** Based on ACOEM guidelines, the role for further urology consultation would not be supported. The guidelines state an occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex when psychosocial factors are present, or when the plan or course of care may benefit from additional expertise. Review of clinical information indicates that this individual has already sought urology consultation in direct relationship to his work-related complaints and issues. There is no current indication of new or significant change to urology complaints at recent clinical assessments for review. There is no documented change in physical examination findings. The absence of significant change in the clinical picture would fail to necessitate further urology consultation at this time.