MAXIMUS Federal Services

Case Number:	CM13-0050688		
Date Assigned:	12/27/2013	Date of Injury:	06/15/2012
Decision Date:	04/04/2014	UR Denial Date:	11/12/2013
Priority:	Standard	Application Received:	11/14/2013

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 Internal Medicine and is licensed to practice in New York. 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:

The patient is a 39-year-old male with a date of injury on 06/15/2012. He was involved in a motor vehicle accident during which his truck flipped over multiple times. He has a past history of methamphetamine abuse and depression. Cognitive function is normal. He has left shoulder, left elbow, left hip, low back and lower extremity pain. He has anxiety and depression. He has had increased urinary frequency of small urine volumes of 3 to 5 oz of urine. He had decreased libido and Levitra was ordered.

IMR ISSUES, DECISIONS AND RATIONALES

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

Urodymanic Studies and Cystoscopy with IV Sedation: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Canadian Urological Association Journal

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Campbell - Walsh Urology, 10th Edition, 2011

Decision rationale: UrodymaThere are no MTUS, ACOEM or ODG guidelines for this case. There is no objective support for the trauma causing neurogenic bladder. He has diabetes. He had had a urine analysis documenting glucose in the urine but the urine was negative for WBC, RBC, protein, leukocyte esterase and ketones. There is no incontinence and there is no documentation

that he has a large residual volume. As noted in the previous review, the next step is an ultrasound for residual bladder (or straight cath for residual if bladder ultrasound is not available). If his residual is normal then the frequent small voiding volumes are due to stress and anxiety. The next step in the work up is not cystoscopy with urodynamic studies. There is no documentation of intrinsic bladder wall inflammatory disease/fibrosis.

Pre-Operative Clearance: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Canadian Urological Association Journal

MAXIMUS guideline: The Expert Reviewer did not cite any medical evidence for its decision.

Decision rationale: Since the primary procedure is not medically necessary, none of the associated services are medically necessary.