

<b>Case Number:</b>	CM14-0008209		
<b>Date Assigned:</b>	02/12/2014	<b>Date of Injury:</b>	03/28/2007
<b>Decision Date:</b>	10/08/2014	<b>UR Denial Date:</b>	12/27/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	01/22/2014

### 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 Internal 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 injured worker is a 49 year old male who reportedly suffered an industrial injury on 3/28/2007. He developed prostate cancer which was apportioned and attributed to chemical exposures during his career. He underwent a prostatectomy that was robotically assisted and radical in nature resulting in erectile dysfunction and incontinence. He was last seen on 12/27/2013 by the urologist and request is for indefinite visits to the physician.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Consult: Office Visit for Indefinite Period of Time:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Rev Urol 2013;15(2):61-6 Conservative treatment for postprostatectomy incontinence and Ther Adv Urol 2013 Aug;5(4):189-200. Diagnosis and office-based treatment of urinary incontinence in adults

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG)

**Decision rationale:** Indefinite visits to a physician for management of a condition suggest that the condition is chronic and unlikely to improve. It also implies that it requires ongoing medical supervision rather than being self-managed or managed by non-physician practitioners

independently. The patient has incontinence and erectile dysfunction for which physician visits are being sought indefinitely. As conservative and surgical treatments are available for the patient's clinical condition, indicated in the UR done and accompanying the medical records, it is not justifiable to recommend for the current request. Ongoing physician visits should be based on ongoing need and although currently the patient does have a medical need, one cannot project into the future and definitely know that lifelong indefinite visits will be necessary for these conditions. Therefore, the request is not medically necessary.