

Case Number:	CM14-0120155		
Date Assigned:	09/16/2014	Date of Injury:	01/07/2009
Decision Date:	10/22/2014	UR Denial Date:	06/25/2014
Priority:	Standard	Application Received:	07/29/2014

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 Physical Medicine and Rehabilitation, has a subspecialty in Pain 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 35-year-old female who was reportedly injured on January 7, 2009. The most recent progress note dated June 18, 2014, indicates that there are ongoing complaints of a sensation of incomplete bladder emptying secondary to non-obstructive urinary retention. There was a discussion regarding two-week stimulation trial test of a sacral nerve stimulator. No physical examination was performed on this date. Diagnostic ultrasound of the kidneys revealed bilateral hydronephrosis. Previous treatment includes oral medications and catheterization procedures. A request had been made for a sacral nerve stimulation test in two stages and was not certified in the pre-authorization process on June 27, 2014.

IMR ISSUES, DECISIONS AND RATIONALES

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

SNS (SACRAL NERVE STIMULATION) 1ST STAGE: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITIES GUIDELINES

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Urinary Incontinence Treatments for Women, Beyond the Basics, Dr. Kathryn DuBeau, Updated April 26, 2013.

Decision rationale: A surgically implanted stimulator works by sending electrical pulses to the sacral nerve which seems to help people with severe symptoms of urgency incontinence, frequency, or urinary retention who have not improved with other treatments. A review of the medical records does not indicate that the injured worker has not improved with other treatments and she has stated to have done well with intermittent catheterization. As such, this request for a sacral nerve stimulation first stage, and a second stage to be done two weeks later is not medically necessary.

SNS (SACRAL NERVE STIMULATION) 2ND STAGE - TO BE DONE 2 WEEKS AFTER STAGE 1: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation OFFICIAL DISABILITIES GUIDELINES

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Other Medical Treatment Guideline or Medical Evidence: Urinary Incontinence Treatments for Women, Beyond the Basics, Dr. Kathryn DuBeau, Updated April 26, 2013.

Decision rationale: A surgically implanted stimulator works by sending electrical pulses to the sacral nerve which seems to help people with severe symptoms of urgency incontinence, frequency, or urinary retention who have not improved with other treatments. A review of the medical records does not indicate that the injured worker has not improved with other treatments and she has stated to have done well with intermittent catheterization. As such, this request for a sacral nerve stimulation first stage, and a second stage to be done two weeks later is not medically necessary.