

Case Number:	CM14-0169882		
Date Assigned:	10/20/2014	Date of Injury:	09/17/2010
Decision Date:	11/20/2014	UR Denial Date:	09/16/2014
Priority:	Standard	Application Received:	10/14/2014

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 and is licensed to practice in Texas. 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:

Medical Records reflect the claimant is a 54 year old female who sustained a work injury on 9-17-10. The claimant is status post left shoulder surgery in 2011 which included arthroscopic debridement with subacromial decompression and rotator cuff repair. Office visit on 10-10-14 notes the claimant is psychiatrically doing about the same. She is having right shoulder surgery on 10-21-14. The claimant is awaiting authorization for Viagra. The claimant's left shoulder is better. Zoloft and Ambien are helping without side effects. Her depression and anxiety are stable.

IMR ISSUES, DECISIONS AND RATIONALES

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

Viagra 50mg Tpo Qd Prn: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

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: US National Library of Medicine.

Decision rationale: US National Library of Medicine notes that Sildenafil (Viagra) is used to treat erectile dysfunction (impotence; inability to get or keep an erection) in men. Sildenafil

(Revatio) is used to improve the ability to exercise in adults with pulmonary arterial hypertension (PAH; high blood pressure in the vessels carrying blood to the lungs, causing shortness of breath, dizziness, and tiredness). Children should not usually take sildenafil, but in some cases, a doctor may decide that sildenafil (Revatio) is the best medication to treat a child's condition. Sildenafil is in a class of medications called phosphodiesterase (PDE) inhibitors. Sildenafil treats erectile dysfunction by increasing blood flow to the penis during sexual stimulation. This increased blood flow can cause an erection. Sildenafil treats PAH by relaxing the blood vessels in the lungs to allow blood to flow easily. This medication is indicated in men with ED. There is an absence in documentation noting any extenuating circumstances to support the request of this medication in this female claimant. There has been some documentation that this medication also helps women who experience sexual problems from anti-depressant use. However, there are not high quality studies to support Viagra in females. Therefore, the medical necessity of this request is not established.