

Case Number:	CM14-0172270		
Date Assigned:	10/23/2014	Date of Injury:	09/09/2000
Decision Date:	11/21/2014	UR Denial Date:	09/23/2014
Priority:	Standard	Application Received:	10/17/2014

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 Emergency 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 60-year-old male who reported an injury on 09/09/2000 due to repetitive kneeling and squatting on the job, with subsequent development of post-traumatic arthritis of the metatarsophalangeal joint of the right great toe. The injured worker had a bunionectomy surgery, with subsequent development of a callus on the plantar medial aspect of the interphalangeal joint of the right great toe from abnormal distribution. Diagnoses were impotence, organic, and referred scrotal pain. The injured worker had a urologic evaluation on 09/08/2014 that revealed there were no significant changes in his overall urologic condition. It was reported that the injured worker was doing well with Cialis 20 mg as needed for his erectile dysfunction. He has noticed, however, that the medication takes a little longer to act. He has made it a habit to take the Cialis 1 day prior to intended sexual activity so that he will be able to perform the next day. Overall, the injured worker was satisfied with his treatment. The injured worker did not give any history of significant voiding dysfunction, urinary tract infection, or other significant urological symptoms. It was also noted that the injured worker was well preserved. There were no abnormalities involving the external genitalia. Rectal examination was deferred at the injured worker's request. Medications were Nucynta 50 mg 5 tablets per day, Lidoderm 5% patches, Nexium 40 mg 1 every day, Celebrex 200 mg 1 tablet twice a day, and Cialis 20 mg as needed. The rationale was not submitted. The Request for Authorization was submitted for review.

IMR ISSUES, DECISIONS AND RATIONALES

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

Cialis 20 mg # 30: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM. Decision based on Non-MTUS Citation The Management of erectile dysfunction retrieved from <http://www.guidelines.gov/content.aspx>.

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: RxList.com, Cialis, Indications and Dosage <http://www.rxlist.com/cialis-drug/indications-dosage.htm>.

Decision rationale: The decision for Cialis 20 mg #30 is not medically necessary. According to RxList.com, Cialis is indicated for the treatment of the signs and symptoms of benign prostatic hyperplasia and for the treatment of erectile dysfunction. The physical examination submitted for review does not indicate exactly why the injured worker is on Cialis. It was reported that the injured worker was doing well with Cialis 20 mg as needed for his erectile dysfunction. The injured worker has noticed, however, that the medication takes a little longer to act. Although the injured worker has reported good results from Cialis, the provider did not indicate a frequency for the medication. Therefore, this request is not medically necessary.