MAXIMUS Federal Services

Case Number:	CM14-0032738		
Date Assigned:	06/20/2014	Date of Injury:	01/10/1997
Decision Date:	07/18/2014	UR Denial Date:	02/21/2014
Priority:	Standard	Application Received:	03/14/2014

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 General Surgery, 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:

This 55 year old male was injured in 1997. Since his date of injury, he has had three lumbar spine surguries, a cervical herniated nucleus pulposis with radiculopathy, a penile prosthesis due to neurogenic impotence, chronic left testicular pain, hearing loss, decaying teeth likely due to chronic narcotic use, chronic pain, hypertension, severe depression, suicidal ideations, anxiety, and stress. On 2/14/14 left orchiectomy and removal/replacement of the penile prosthesis that had been inserted in 2004 was suggested. Urologist [redacted] first saw the patient in 2012 and made these recommendations. He again saw the patient on 11/4/13. He stated that the patient has had a soft painful left testicle the past 15 years. He opines that an atrophied testicle is often more painful as the atrophy worsens. There is a history of left inguinal radicular pain. He has never been treated with exogenous tetosteroine. The atrophy, therefore, is due to his narcotic use as a result of his industrial injury. The penile prosthesis is 10 years old. It is functioning mechanically, but not sufficient for him to achieve vaginal penetration. He suspects that the patient will require exogenous testosterone after the orchidectomy. [redacted] was asked 2/20/14 to see the patient again and do a more thorough examination.

IMR ISSUES, DECISIONS AND RATIONALES

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

Removal and replacement of malfunctioning penile prosthesis: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Sadeghi-Nejad H. "Penile prosthesis surgery: a review of prosthetic devices and associated complications." J Sex Med. 2007 Mar,4(2):296-309.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Sadeghi-Nejad H. Penile Prosthesis Surgery: A Review of Prosthetic devices and Associated Complications J. Sex Med 2007 Mar;4(2):296-309; Ther Adv Urol. 2010 Feb;2(1):35-40. doi: 10.1177/1756287209359174. Penile prostheses. Bettocchi C, Palumbo F, Spilotros M, Palazzo S, Saracino GA, Martino P, Battaglia M, Selvaggi FP, Ditonno P.; and Int J Impot Res. 2003 Feb;15(1):22-5. Inflatable penile prosthesis: site-specific malfunction analysis. Garber BB.

Decision rationale: The patient has had left orchidynia for 15 years secondary to testicular atrophy likely secondary to chronic narcotic use, the result of an industrial injury in 1997. Neurogenic impotence resulted, and he had a penile prosthesis inserted in 2004. The penile prosthesis is 10 years old and, although mechanically functioning, it is not functioning sufficiently to permit vaginal penetration. As such, the request for removal and replacement of the penile prosthesis and for a left orchiectomy is reasonable and medically necessary.