

Case Number:	CM14-0034270		
Date Assigned:	06/23/2014	Date of Injury:	09/24/2010
Decision Date:	07/24/2014	UR Denial Date:	02/28/2014
Priority:	Standard	Application Received:	03/19/2014

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 Family Practice and is licensed to practice in North Carolina. 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 claimant is a 44-year-old man with date of injury of 9/24/2010. The mechanism of injury is not described in the submitted records. The treating physician describes primary complaints of shoulder pain and has recommended surgical intervention with subsequent physical therapy. He notes that the claimant has uncontrolled diabetes for which he referred the claimant to an internist. The treating physician's notes state that the internist recommended urology consult for recurrent foreskin infections.

IMR ISSUES, DECISIONS AND RATIONALES

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

Consultation with Urologist: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 7 Independent Medical Examinations and Consultations, page 127.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004), Chapter 7 Independent Medical Examinations and Consultations, page 127.

Decision rationale: The medial records submitted for review do not contain any history or physical examination describing foreskin infections and do not contain any medical rationale for the causal relationship of diabetes and any foreskin infections to the industrial shoulder injury. Although ACOEM recommends consultation with appropriate specialists to reach appropriate diagnoses and treatment plans, there is no reasonable medical necessity described in the medical records for urology consultation for recurrent foreskin infections which would aid in the diagnosis or treatment of the industrially related shoulder injury. The urology consult is not medically necessary.