

<b>Case Number:</b>	CM14-0039807		
<b>Date Assigned:</b>	06/27/2014	<b>Date of Injury:</b>	05/14/2008
<b>Decision Date:</b>	08/07/2014	<b>UR Denial Date:</b>	03/21/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	04/04/2014

### 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 Psychiatry 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 49 year old male with date of injury 5/14/2008. Date of the UR decision was 3/21/2014. The injured worker was run over by a fork lift which resulted in him having a pelvic fracture and multiple other orthopedic injuries s/p penile implant placement. Report dated 9/10/2013 suggested that he was switched from Pristiq 50 mg twice daily to Viibryd 40 mg; it was stated that he continued to feel depressed and cried occasionally. Report dated 9/23/2013 indicated that he was very depressed, fearful; found it difficult to cope with permanence of pain, issues of the injury. It was listed that he reported feeling useless as he was unable to have sex with his wife. The psychotropic medications being prescribed for him were Bupropion, Mirtazepine, Pristiq and Abilify. The reported suggested that he suffered from erectile dysfunction after the surgery; was prescribed Levitra but was refractory to its benefits. He underwent a revision circumcision and urethral dilation 2011. Injured worker has been noted to experience depression, anxiety, sleep difficulties, sexual dysfunction and PTSD (Post Traumatic Stress Disorder) per the report dated 9/23/2013.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**8 Sessions of sex therapy:** Upheld

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

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Psychological treatment Page(s): 100-102. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental illness & stress, cognitive therapy for depression.

**Decision rationale:** The injured worker is a 49 year old male who was run over by a fork lift which resulted in him having a pelvic fracture, multiple other orthopedic injuries status post penile implant. Report dated 9/10/2013 suggested that he continued to feel depressed and cried occasionally. Report dated 9/23/2013 indicated that he was very depressed, fearful; found it difficult to cope with permanence of pain, ongoing issues of the injury. It was listed that he reported feeling useless as he was unable to have sex with his wife. He was prescribed several psychotropic medications namely Bupropion, Mirtazepine, Pristiq and Abilify. The report suggested that he suffered from erectile dysfunction after the surgery; was prescribed Levitra but was refractory to its benefits. He underwent a revision circumcision and urethral dilation in 2011. Injured worker has been noted to experience depression, anxiety, sleep difficulties, sexual dysfunction and PTSD (Post Traumatic Stress Disorder) per the report dated 9/23/2013. The erectile dysfunction was thought to be a result of the neurovascular injury s/p pelvic fracture. Therefore, the request for 8 sessions of Sex therapy is not medically necessary as the reason for erectile dysfunction is thought to be as a result of neurovascular injury rather than of psychological origin.