

Case Number:	CM14-0200306		
Date Assigned:	12/10/2014	Date of Injury:	12/01/2004
Decision Date:	02/13/2015	UR Denial Date:	10/28/2014
Priority:	Standard	Application Received:	12/01/2014

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 Preventive Medicine, has a subspecialty in Occupational Medicine and is licensed to practice in Iowa. 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 patient is a 75 year old employee with date of injury of 12/01/04. Medical records indicate the patient is undergoing treatment for growth on left testicle. Subjective complaints include a mass on the left scrotal. S/p bladder cancer resected on 12/04. BPH with urinary obstruction. Denies pain and redness or signs of infection but says the testicle has increased in size. Objective findings include on ultrasound (10/2/14) found a 1/5 cm circumscribed mass in the tail of the epididymis. There is no pain with palpation. Treatment has consisted of Atenolol, aspirin, Simvastatin and Zolpidem. The utilization review determination was rendered on 10/28/14 recommending non-certification of a Repeat scrotal; ultrasound.

IMR ISSUES, DECISIONS AND RATIONALES

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

Repeat Scrotal; Ultrasound: Overturned

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation <http://www.ncbi.nlm.nih.gov/pubmed10645188>

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: <http://www.uptodate.com>; Evaluation-of-nonacute-scrotal-pathology-in-adult-

Decision rationale: MTUS and ACOEM are silent concerning a scrotal ultra sound. UPtoDate states "A scrotal ultrasound should be considered if the diagnosis is in question since a reactive hydrocele can occur in the presence of a testicular neoplasm or with acute inflammatory scrotal conditions". The treating physician notes a "1.5CM circumscribed scrotal mass in the tail of the epididymis" and details that the patient has a history of bladder cancer. A scotal ultrasound is needed to distinguish between a benign mass and a neo plasma. As such the request for Repeat Scrotal; Ultrasound is medically necessary.