

<b>Case Number:</b>	CM14-0141411		
<b>Date Assigned:</b>	09/10/2014	<b>Date of Injury:</b>	05/15/1996
<b>Decision Date:</b>	10/10/2014	<b>UR Denial Date:</b>	08/18/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/02/2014

### 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 Medicine 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 had an original date of injury of 5/15/1996. Past treatments have included physical therapy, medications, functional restoration program and surgical interventions including back surgery, total knee replacement, carpal tunnel syndrome and gastric bypass. The current diagnoses include bilateral rotator cuff syndrome thoracic spine dysfunction, L4-L5 disc herniation and migraine headache. The requests are for Botox injection and testosterone cypionate.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Unknown botox injections:** Upheld

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 25-26.

**Decision rationale:** CA MTUS states that Botox is not medically indicated for most chronic pain syndromes but is indicated for cervical dystonia. Botox is not indicated for tension type headaches, migraine headache, fibromyositis, chronic neck pain, trigger point injections or myofascial pain syndrome. It may be considered for low back complaints with current

recommendation that if initial response is favorable, it may be continued as an option for those patients enrolled in a functional restoration program. The request for Botox for treatment of migraine headache is not medically necessary,

**Unknown testosterone cypionate:** Upheld

**Claims Administrator guideline:** The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG),

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Page(s): 110-112.

**Decision rationale:** CA MTUS recognizes that hypogonadism has been noted in patients taking intrathecal or high dose opioid therapy long term. However, testing of testosterone levels is not recommended as a routine measure in patients taking opioids and is to be considered in cases where there is documentation of objective physical findings of hypogonadism, such as gynecomastia. Etiology of decreased sexual function, a symptom of hypogonadism, is confounded by several factors including the following:(1) The role of chronic pain itself on sexual function; (2) The natural occurrence of decreased testosterone that occurs with aging; (3) The documented side effect of decreased sexual function that is common with other medications used to treat pain (SSRIs, tricyclic antidepressants, and certain anti-epilepsy drugs); & (4) The role of comorbid conditions such as diabetes, hypertension, and vascular disease in erectile dysfunction. In this case there is objective documentation of hypogonadism, such as a testosterone level. Testosterone cypionate is not medically indicated and the original UR denial is upheld.