

Case Number:	CM14-0098618		
Date Assigned:	09/16/2014	Date of Injury:	10/03/2012
Decision Date:	10/15/2014	UR Denial Date:	05/28/2014
Priority:	Standard	Application Received:	06/26/2014

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 Surgeon 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 33 year old male sustained an injury 10/3/12. The diagnoses are jury He recently has had the added complaints of urgency incontinence, urinary frequency, erectile dysfunction, and inability to ejaculate. A GU sonogram, cystoscopy, and urodynamic studies have been requested as of 6/30/14. A question of causation has been raised with respect to the relationship between the GU complaints and the injury and mechanism of injury.

IMR ISSUES, DECISIONS AND RATIONALES

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

GU ultrasound/sonogram: Overturned

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

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: Smith and Tanagho's General Urology, Eighteenth Edition (Smith's General Urology) by Jack McAninch and Tom F. Lue (Aug 21, 2012)

Decision rationale: These urological studies might well be medically necessary in an effort to mete out a cause of this patient's complaint of urge incontinence, stress incontinence, erectile dysfunction, and anorgasmia. There does not appear to be a direct correlation between the

mechanism of injury here and the diagnoses as noted in the clinical summary: neck pain, cervicobrachial syndrome; left knee pain, PTSD, post traumatic headache, headache post-concussive, depression, anxiety, panic attacks. However, his psychiatric changes are the result of the injury if on no other basis than PTSD. Therefore the request for GU Ultrasound/Sonogram is medically necessary.

Cystiscopy: Overturned

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

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: Smith and Tanagho's General Urology, Eighteenth Edition (Smith's General Urology) by Jack McAninch and Tom F. Lue (Aug 21, 2012)

Decision rationale: These urological studies might well be medically necessary in an effort to mete out a cause of this patient's complaint of urge incontinence, stress incontinence, erectile dysfunction, and anorgasmia. There does not appear to be a direct correlation between the mechanism of injury here and the diagnoses as noted in the clinical summary: neck pain, cervicobrachial syndrome; left knee pain, PTSD, post traumatic headache, headache post-concussive, depression, anxiety, panic attacks. However, his psychiatric changes are the result of the injury if on no other basis than PTSD. Therefore the request for Cystoscopy to evaluate his urgency incontinence is medically necessary.

Urodynamic study: Overturned

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

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: Smith and Tanagho's General Urology, Eighteenth Edition (Smith's General Urology) by Jack McAninch and Tom F. Lue (Aug 21, 2012)

Decision rationale: These urological studies might well be medically necessary in an effort to mete out a cause of this patient's complaint of urge incontinence, stress incontinence, erectile dysfunction, and anorgasmia. There does not appear to be a direct correlation between the mechanism of injury here and the diagnoses as noted in the clinical summary: neck pain, cervicobrachial syndrome; left knee pain, PTSD, post traumatic headache, headache post-concussive, depression, anxiety, panic attacks. However, his psychiatric changes are the result of the injury if on no other basis than PTSD. Therefore the request for Urodynamic studies to evaluate bladder function is medically necessary.