

<b>Case Number:</b>	CM14-0211616		
<b>Date Assigned:</b>	12/24/2014	<b>Date of Injury:</b>	03/14/2003
<b>Decision Date:</b>	02/27/2015	<b>UR Denial Date:</b>	12/08/2014
<b>Priority:</b>	Standard	<b>Application Received:</b>	12/17/2014

### 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. 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/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: California, Arizona

Certification(s)/Specialty: Physical Medicine & Rehabn

### 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 53-year-old male who reported an injury on 03/14/2003. The mechanism of injury involved heavy lifting. The injured worker is currently diagnosed with voiding dysfunction and impotence. The injured worker presented on 11/24/2014 with complaints of frequency, urgency, and nocturia. As far as erectile dysfunction was concerned, the patient was well with Viagra 100 mg. It was noted that the injured worker underwent laboratory testing on 11/05/2015, which revealed a PSA level of 1.1 and a serum testosterone level of 276. The injured worker also underwent a diagnostic cystoscopy on 11/24/2014, which revealed mild to moderate enlargement of the bladder without obstruction. Treatment recommendations included initiation Vesicare 10 mg daily and continuation of Viagra 100 mg on an as needed basis.

### IMR ISSUES, DECISIONS AND RATIONALES

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

**Viagra 100mg Qty 12 with 4 refills:** Upheld

**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 [www.nlm.nih.gov](http://www.nlm.nih.gov). U.S. National Library of Medicine.

U.S. Department of Health and Human Services National Institutes of Health. Sildenafil.  
Updated: 12 Jan 2015.

**Decision rationale:** According to the U.S. National Library of Medicine, Viagra is used to treat erectile dysfunction in men. According to the documentation provided, the injured worker has been diagnosed with organic impotence. However, there was no explanation for the organic impotence. The injured worker has a normal free testosterone level. Additionally, the current request does not include a frequency. The request for 4 refills would be excessive in nature, as the patient's response to the medication would require assessment prior to additional prescription refills.