

Case Number:	CM15-0124124		
Date Assigned:	07/08/2015	Date of Injury:	01/17/2002
Decision Date:	08/14/2015	UR Denial Date:	06/10/2015
Priority:	Standard	Application Received:	06/26/2015

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: Pennsylvania

Certification(s)/Specialty: Internal Medicine, Hospice & Palliative Medicine

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 60-year-old male who received an industrial-related diagnosis of prostate cancer on 1/17/2002. Treatment has included triple hormone blockade and testosterone replacement therapy. Report of 4/15/2015 documents stable PSA at <1. The injured worker reports he is free of symptoms. The treating physician's plan of care includes annual diagnostic test bone scans of the whole body with unspecified duration. Work status at present is not addressed in provided documentation.

IMR ISSUES, DECISIONS AND RATIONALES

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

Diagnostic test bone scan, annually, unspecified duration, of the whole body: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation eMedicine & Prostate cancer treatment & Management.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Penson DF, et al. Follow-up surveillance during and after treatment for prostate cancer. Topic 6928, version 9.0. Up-to-date, accessed 08/12/2015.

Decision rationale: A bone scan is an imaging study that uses a small amount of radioactive dye to find cancer in the bones. The MTUS Guidelines are silent on this issue. The literature and established guidelines supports using close clinical monitoring and a blood test called a prostate specific antigen (PSA) to monitor prostate cancer after treatment is done. Routine advanced imaging studies are helpful when there are symptoms or findings suspicious for the cancer coming back or getting worse; there is no role for routine surveillance imaging with a bone scan. The submitted and reviewed documentation reported the worker suffered from prostate cancer. These records indicated the worker had no new or worsening suspicious symptoms or findings. There was no discussion describing special circumstances that sufficiently supported this request. Further, the request was for yearly imaging indefinitely, which would not account for changes in the worker's care needs, research, or technology. For these reasons, the current request for a diagnostic bone scan done yearly for an indefinite amount of time is not medically necessary.