MAXIMUS Federal Services

Case Number:	CM15-0094458		
Date Assigned:	05/21/2015	Date of Injury:	07/05/2011
Decision Date:	06/22/2015	UR Denial Date:	04/21/2015
Priority:	Standard	Application Received:	05/18/2015

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: California, Indiana, New York
Certification(s)/Specialty: Internal 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 48 year old male, who sustained an industrial injury on 07/05/2011. Medical records provided by the treating physician did not indicate the injured worker's mechanism of injury. The injured worker was diagnosed as having depressive disorder, sleep apnea, cephalgia, chronic sinusitis secondary to inhalation of dust and pollen, palpitations secondary to psychological stress, gastritis/gastroesophageal reflux disease secondary to psychological stress, eight pound weight loss in a two month time period, cervical and thoracic myospasm secondary to psychological stress, panic disorder, musculoskeletal type of chest pain, and chronic obstructive pulmonary disease secondary to cigarette smoking and industrial chemical exposure. Treatment and diagnostic studies to date has included medication regimen, chest x-ray, pulmonary function testing, x-ray of the sinuses, and impedance cardiogram testing. In a progress report dated 11/06/2015 the treating physician reports complaints of headaches, lightheadedness and dizziness, bilateral ocular pain, blurry vision, left ear pain, sinus congestion, postnasal drip, chest pain, palpitations, shortness of breath, epigastric burning pain with reflux symptoms, nausea, an 8 pound weight loss in the last 2 months, neck pain, low back pain, peripheral edema, depression, difficulty concentrating, difficulty sleeping, forgetfulness, and intolerance to the heat and cold. Examination revealed anterior chest wall tenderness, pain on forward flexion of the thorax, an occasional irregular heartbeat, tenderness and myospasm of the cervical and thoracic paraspinal muscles, tenderness of the pectoralis muscles on the right, and pulse oximetry of 98%. The treating physician requested the medication Viagra 100mg with a

quantity of 5 noting prior prescription of this medication. However, the documentation provided did not indicate the specific reason for the requested medication.

IMR ISSUES, DECISIONS AND RATIONALES

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

Viagara 100 Mg #5: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation PDR Drug summary - Viagra.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation http://www.nlm.nih.gov/medlineplus/druginfo/meds/a699015.html.

Decision rationale: Pursuant to Medline plus, Viagra 100 mg #5 is not medically necessary. Sildenafil (Viagra) is used to treat erectile dysfunction (impotence; inability to get or keep an erection) in men. Sildenafil (Revatio) is used to improve the ability to exercise in adults with pulmonary arterial hypertension (PAH; high blood pressure in the vessels carrying blood to the lungs, causing shortness of breath, dizziness, and tiredness). Children should not usually take sildenafil, but in some cases, a doctor may decide that sildenafil (Revatio) is the best medication to treat a child's condition. Sildenafil is in a class of medications called phosphodiesterase (PDE) inhibitors. Sildenafil treats erectile dysfunction by increasing blood flow to the penis during sexual stimulation. This increased blood flow can cause an erection. Sildenafil treats PAH by relaxing the blood vessels in the lungs to allow blood to flow easily. In this case, the injured worker’s working diagnoses are depressive disorder, sleep apnea, cephalgia, chronic sinusitis secondary to inhalation of dust and pollen; palpitations; gastritis/Gerd; a common weight loss; cervical and thoracic myospasm; panic disorder; musculoskeletal chest pain; and chronic obstructive lung disease. A progress note dated April 1, 2015 does not contain documentation of subjective complaints or objective clinical findings of erectile dysfunction. There is no diagnosis of erectile dysfunction. There are no testosterone levels or workout for erectile dysfunction. There is no documentation of objective functional improvement with ongoing Viagra 100 mg. Consequently, absent clinical documentation with a clinical indication, rationale and workup for erectile dysfunction, Viagra 100 mg #5 is not medically necessary.