

Letter of Medical Necessity #5

Letter of Medical Justification

John Doe

DOB: 6.30.79

Diagnosis: C6 ASIA A SCI

Onset: 11.14.00

Height: 5'9"

Weight: 61.4 kg

Primary Funding: Medicaid

I. Brief Medical History:

John sustained C5 C6 fractures in MVA on 11.14.00. He underwent fusion on 11.21.00. He also sustained right acetabular fracture and left navicular fracture-dislocation during the crash. There was no reported loss of consciousness. He was placed on a ventilator with trach on 11.27.00. After stabilization he was transferred to _____ for rehabilitation. He was admitted with C3 ASIA A diagnosis and was vent dependent. He was weaned from the vent and was discharged home verbally independent and able to drive a sip and puff power wheelchair.

John has made significant gains over the course of his injury and has responded well to phased rehab stays at _____. At the most recent stay his ASIA score had improved to C6 with a zone of partial preservation into C7. Due to a history of recurrent urinary tract infections John has now transitioned to intermittent catheterization program and has adjusted his bowel program to decrease from 2 hour to just under one hour. He has had a history of skin breakdown, which is currently resolved. He is now able to drive a power wheelchair with a joystick in the community and can propel a manual wheelchair in accessible even surfaces for short distances. He assists with transfers at the max assist level.

II. Current Function:

Ambulation: Nonambulatory due to level of SCI. Does tolerate passive standing in therapy well.

Transfers: One plus pivot for uneven-dependent. Assists at mod/max assist for even with board.

Activities of Daily Living: Feeds self. Completes basic hygiene with set up- min assist. Requires assist for dressing and bathing. He is able to instruct others.

Mobility: John uses a power wheelchair with tilt in space for pressure relief in community and often at home. He is able to propel a manual wheelchair on even surfaces for a limited distance.

School: John has been in communication with Voc Rehab and plans to attend college in the coming year.

Transportation: John has an accessible van, but is not yet driving himself.

III. Physical/ Medical Condition

- ROM: John receives daily stretching to his trunk and lower extremities but struggles as most individuals with SCI to maintain range due to positioning and tone especially in the hip flexor and heelcord areas. When trailing the Easystand Evolv Glider he increased his range to within normal limits at both these key areas due to the reciprocating lower extremity movement that keys these problem areas.

- Tone/Spasticity: John exhibits significantly high lower extremity and trunk spasticity, which makes mobility and transfers challenging and creates a safety risk. Spasms cause difficulty with maintaining proper wheelchair positioning which could lead to skin breakdown and also cause for discomfort and interrupted sleep patterns. Spasticity also leads to ROM loss and contractures. For John to consider driving in the future his spasticity must be under good control. Notable decreased in tone/spasticity occurred during trials of the Easystand Evolv Glider.

- Bowel/Bladder Function: John has a history of recurrent UTI's and long bowel program routine. Standing has been shown to decrease UTI's and time required for bowel program completion due to normalizing the physiologic function in the upright position for complete emptying and motility.

- Maintain Bone Integrity: John is at high risk for long term osteoporosis due to lack of weight bearing and muscle stress on long bones. The increase in calcium can contribute to renal stones of which John has a history. Normalizing weight bearing and stress on the long bones as provided by the Glider may assist in reducing these medical complications. *(continued)*

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- Cardiovascular: After SCI an individual loses many avenues of cardiovascular challenge due to the inactivity of the larger muscle groups which are located predominately in the lower extremities. Standing challenges the cardiovascular system normalize by requiring the heart to pump the blood flow “against gravity” in the upright posture. The Easystand Evolv Glider also provides an upper body strengthening that John is able to complete while he is standing further conditioning the cardiovascular system.

- Skin Integrity: Due to absent gluteal region sensation, limited mobility, and atrophied gluteal musculature, John is at high risk and in fact has a history of skin breakdown. Passive standing provides an alternate upright position for the body that does not focus pressure on the ischial bones. The increase in cardiovascular function further decreases skin breakdown risk due to increased oxygenation to the tissues.

- Balance Restoration: John has been working on balance strength and compensatory strategy in preparation for improved transfer skills. While in the Easystand Evolv Glider John is provided with a safe environment to focus on trunk stabilization and mobility especially through the reciprocal arm/leg movement of the Glider.

IV. Current Program: John currently does a home therapy program with family

- Assist and also attends outpatient services. It is his goal to transition to a more independent program in prep for beginning school. An Easystand Evolv Glider will be integral to this transition providing benefits of standing, ROM, tone reduction, postural control, and cardiovascular strength all in one program that can be completed in a home setting. Facilities close to John do not have a standing frame for his use in the therapy setting.

- In addition to making John more independent in his life wellness program, the standing program recommended can save cost to payer sources by decreasing the possibility of treatment required for UTI's, attendant care for long bowel programs, wound care or potential flap surgeries, and increased tone intervention such as tendon releases or baclofen pump placement: etc.

V. Equipment Trial: John trailed several standers during his phased program.

- The Strap Stander did not provide adequate trunk support (although not needing to transfer to device was a plus) Required assist of 2 persons to come to position.

- Standing Power Wheelchair: Client preferred the drive feel of a rear wheel drive wheelchair and the stander power wheelchair was front wheel drive. Considerable cost savings to have a separate stander instead of the cost of integrating the stander on his power chair.

- Easystand 5000: Provided proper standing position but was not as effective at tone reduction as the recommended equipment and did not incorporate the upper body strength and trunk balance components of the equipment specified.

- Easystand Evolv Glider: John was able to tolerate 30 minutes in this unit on numerous trial occasions with excellent results for cardiovascular enhancement, tone reduction, increased ROM, and decreased bowel program times. His mother was able to set up the system and complete transfer and positioning help as needed.

VI. Recommendations:

- Based on the above information the Easystand Evolv Glider is recommended as the most appropriate standing system for John. Specific order information and pricing is attached. It is recommended that John use the system at least 30 minutes 5 times per week in the home setting to obtain benefits described in part III.

Therapist:

Date:

Physician:

Date: