

Written Order

Phone: 860-674-1601

Fax: 860-218-9966

Walkers & Canes

Per Medicare requirements, a **SIGNED PHYSICIAN'S ORDER is required.**

Please answer all questions below and return to DME Living Well. In addition, please make sure a signed copy is kept in your patient's file.

Patient Full Name: _____ Date of Birth: ____/____/____

Address City/St/Zip: _____

Medicare # _____ Other Insurance Type & # _____

Referring Facility: _____ Contact Name: _____ Phone: _____

Deliver To: ☐ Facility ☐ Home Req Delivery Date: _____ Approx. Time: _____ Discharge Date: _____

Length of Need (Months) (99=Lifetime): _____ Height: _____ Weight: _____

Diagnosis (es) that qualify the need of item delivered: _____

Size: ☐ Junior ☐ Adult ☐ Tall

WALKERS/ROLLATORS/ACCESSORIES

☐ Standard (E0135)

☐ 2 Wheeled (E0143)

☐ Rollator (E0143) & (E0156)

☐ ATA (E0143) & (E0156)

☐ Hemi (E0135)

☐ Platform Attachment (E0154) ☐ Left ☐ Right

CANES

☐ Single Prong Cane (E0100)

☐ Quad Cane – Small Base (E0105)

☐ Quad Cane – Large Base (E0105)

☐ Crutches Pair (E0114)

Requirements for Equipment

☐ Patient has a mobility limitation that significantly impairs ability to participate MRADLS

WALKER

☐ Patient has a mobility limitation that significantly impairs ability to participate MRADLS

☐ Patient able to safely use the walker

☐ Patient's functional mobility deficit is sufficiently resolved with the use of the walker

RX: If done prior to delivery...Do not need CMN

☐ Heavy Duty: Must be OVER 300 lbs. and must have patients weight documented

If patient requires a walker and wheelchair at the same time, the medical record must justify the need for both items: for example, patients' bathroom measurements does not accommodate wheelchair or: patient lives in assisted living and uses chair to go down for meals and entertainment

Ordering Physician, PA, or Nurse Practitioner Name (Please Print): _____ NPI _____

Ordering Physician, PA, or Nurse Practitioner Signature: _____ Date: ____/____/____

Please Fax This Page with Patient Demographics to: 860-218-9966