

All-in-One Medical Necessity Document for Ankle-Foot Orthosis Allied OSI Fall Protection Brace

Note: This document can be used as an outline but must be supported by the same finding in narrative form in the patient's medical record.

PATIENT NAME: _____ **ID #:** _____

DIAGNOSIS CODES:

FALL RISK / IMBALANCE: At Risk / History of Fall – Z91.81 Muscle Weakness – M62.81
 Gait Abnormality / Staggering, Ataxic - R26.0

DJD OF ANKLE & REARFOOT: Osteoarthritis, Localized, Primary; Ankle & Foot - M19.07

DROFFOOT: Dropfoot - M21.37 Hemiplegia - I69.35

LATERAL ANKLE INSTABILITY: Instability of Joint; Ankle & Foot - M24.87

OTHER: _____

DESCRIPTION OF ORTHOPEDIC BRACE & BILLING CODES:

The following Ankle/Foot Orthopedic Brace & Component Parts have been dispensed to the above captioned patient on _____ (date).

- L1940 - AFO, plastic solid shell, molded to patient model
- L2820 - Soft interface, below knee
- L2330 – Addition to lower extremity, lacer molded to patient model, for custom fabricated orthosis
- _____

PROGNOSIS: Good

DURATION OF TREATMENT WITH ORTHOPEDIC BRACE: 12 months

NECESSITY OF ANKLE/FOOT-ORTHOPEDIC BRACE MOLDED TO PATIENT MODEL:

A custom (versus prefabricated) ankle-foot orthosis has been prescribed based upon the following criteria which are specific to the condition of this patient. (Check all that apply):

- The patient could not be fit with a prefabricated AFO.
- The condition necessitating the orthosis is expected to be permanent or of longstanding duration (more than 6 months).
- There is need to control the ankle or foot in more than one plane.
- The patient has a documented neurological, circulatory, or orthopedic condition that requires custom fabrication over a model to prevent tissue injury.
- The patient has a healing fracture which lacks normal anatomical integrity or anthropometric proportions.

I hereby certify that the ankle-foot-orthosis described above is a rigid or semi-rigid device that is used for the purpose of supporting a weak or deformed body member, or restricting or eliminating motion in a diseased or injured part of the body. It is designed to provide support and counterforce on the limb or body part that it is being braced.

Signature of Physician

License Number

Date