



Gait Trainer Letter of Medical Necessity (Sample)

J.T.
123 Main Street
Anywhere USA 12345
(800) 555-2222

Physician: Dr. T. Jones
Therapist: B. Smith
Insurance: Anthem BC/BS
Policy #: 123456789
Secondary Insurance: Medicaid
Policy #: 987654321

DOB: 01/01/2005
Duration of Need: Lifetime
Diagnosis: Cerebral Palsy, Spastic Quadriplegia, Developmental Delay
Height: 4'10"
Weight: 73 lbs.

The following is medical necessity justification for a gait trainer for JT. JT is a 12 year old male with a primary diagnosis of Cerebral Palsy since birth. JT is non ambulatory due to spasticity in all four extremities and overall weakness. JT cannot sit without support. He currently uses a wheelchair with contoured seating to provide him with the needed support throughout the day. JT is currently a student at West Middle School in Anywhere USA. His communication is mostly non-verbal with gestures and a communication device. JT can partially weight bear but requires maximum assistance to maintain his balance.

I am JT's primary school physical therapist. I see JT twice per week for physical therapy during school. I have been working with JT for 3 years now. I have worked with children for 8 years both in the clinical and school settings. I have recommended all types of rehabilitation equipment for clients over that period of time including numerous adaptive walkers and gait trainers.

JT is currently confined to his wheelchair for the duration of the school day. At home JT is bed or wheelchair confined. Currently he has no other device to use and he cannot be transferred to a standard desk or chair. Prolonged sitting in his wheelchair is beginning to result in muscle tightness in JT's lower extremities. This puts JT at risk for flexion contractures. Additionally, JT is at risk for pressure ulcers due to the amount of time he spends in the wheelchair, his inability to perform a weight shift, his diagnoses, and compromised nutritional status. Because JT uses a tilt in space wheelchair, he is unable to propel himself and therefore not independent in his mobility.

I am recommending that JT receive a Moxie GT gait trainer with bilateral forearm platforms, trunk support, and hip positioner with pad. We have trialed the Moxie gait trainer with JT for 4 weeks during his school therapy time. The Moxie provides JT with the necessary support of his pelvis via the hip positioner with the pad. The trunk support provides both front to back and lateral stability for JT's trunk. Additionally, the trunk support can be angled in an anterior position that will help prompt JT to take steps as he learns to ambulate. The bilateral forearm supports will provide an additional surface

for weight bearing through JT's upper extremities. During these trials, JT was well supported in the Moxie gait trainer and demonstrated the ability to initiate taking steps to maneuver the gait trainer on his own. The Moxie allows for all 4 casters to be locked in a straight/ non-swivel position and to be set for one directional rolling. These features are critical for JT as he is just beginning to learn to ambulate. These features will allow JT to focus on straight forward mobility in the gait trainer without any worry of rolling backwards or having to steer. The Moxie GT gait trainer is able to be adjusted for growth to accommodate JT's growth.

The Moxie GT gait trainer will allow JT to work on becoming independent in his mobility. This will allow him to independently explore his environment and interact with his peers. This independence is also critical to the development of JT's cognitive abilities. It will allow JT to assist with his care. Additionally, upright positioning will improve bone density, respiration, swallowing, and digestion. Ambulation will decrease the likelihood of lower extremity joint contractures and offer an alternative position to reduce the likelihood of a pressure ulcer resulting from prolonged sitting.

We have trialed JT in 2 other gait trainers and the Moxie provided JT with the most support and growth adjustability. The other options did not provide enough trunk support, nor did the casters on those gait trainers offer all the features required to allow safe use for JT. The Moxie was also the least costly alternative that could perform all of the functions required for JT.

It is the goal of JT and his primary caregivers for him to become more independent in his mobility. This will allow JT to use the Moxie GT gait trainer to move between different areas of the school, as well as within his primary classroom. The use of the Moxie GT gait trainer will also improve JT's overall strength, decrease his spasticity, improve respiration and digestion, encourage JT's cognitive development. For all of the above reasons, it is recommended that JT be provided a Moxie GT gait trainer with the specified accessories.

Mr. or Mrs. Physical Therapist

Dr. Doctor

Date

Date