

Sample Letter of Medical Necessity

Manual Hospital Bed

(patient) is a (age) year old (sex), that has a diagnosis of but not limited to (diagnosis). (patient) is non-ambulatory and dependent on her/his caregiver 24 hours a day for all aspects of care. Due to his/her medically complex condition, (patient) requires frequent body changes to help prevent contractures and skin breakdown. She/He also requires the head of the bed to be elevated greater than 30 degrees to assist in managing her/his secretions and prevent aspiration. The caregiver has tried pillow and wedges with a regular bed but were unsuccessful in meeting the needs that (patient) required, (why were they unsuccessful----may be due to... as she/he would slip off of the pillows and due to her being non-ambulatory would not be able to re-position herself/himself therefore, causing a safety issue.)

I am recommending that (patient) be provided with a manual hospital bed, as the patient is unable to manage the controls on a semi-electric bed. The manual hospital bed will be able to accommodate (patient) with the need for frequent positioning safely, the flexibility on height to be able to transfer safely from the bed to her wheelchair and to give her the elevation of her upper body to be able to handle her secretions more effectively.