

## Documentation of Medical Necessity Required for Consideration of Artificial Limb

### I. Patient's classification level (please mark appropriate level):

- Level 0:** Does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility.
- Level 1:** Has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence. Typical of the limited and unlimited household ambulator.
- Level 2:** Has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs or uneven surfaces. Typical of the limited community ambulator.
- Level 3:** Has the ability or potential for ambulation with variable cadence. Typical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion.
- Level 4:** Has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels. Typical of the prosthetic demands of the child, active adult, or athlete.

### II. Patient's functional capabilities:

*This assessment of physical and cognitive capabilities includes (but is not limited to) the following:*

- History of present condition(s) and relevant past medical history:

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- Symptoms/diagnoses affecting ambulation or dexterity:

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- Other co-morbidities relating to ambulation or impacting the use of a prosthesis:

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- What ambulatory assistive device (cane, walker, wheelchair, caregiver, etc) is currently used:

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- Description of current and potential activities of daily living and how impacted by deficit(s):

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- Physical examination relevant to functional deficit(s):

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- Weight and height, noting any recent weight loss/gain:

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- Assessment of upper and lower extremity strength and range of motion:

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- Assessment of gait, balance and coordination potential:

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- Patient's motivation to ambulate/use prosthesis:

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\*\*This is a guideline of necessary information that needs to be included in the referring doctor's evaluation/clinic documentation. Documentation for insurance necessity must be in the doctor's office visit notes.