

## Medicare Documentation Requirements – Spinal Orthosis

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**Patient:**

**DOB:**

**Note:** Medicare requires an objective description of pertinent information. The following information must be included in the ordering Physician, ARNP, or PA-C's medical chart notes.

**Please document all items below in your chart note, even if it is not applicable.**

1. Valid ordering prescription with an ICD 10 diagnosis code.
2. Patient symptoms – list **all**.
  - a. How are the patient's activities of daily living affected by deficit(s)?
  - b. Comorbidities that may impact use of brace?
3. Attempted treatments and results (injections, rest, ice, etc.)?
4. Physical therapy? Results?
5. Prognosis of condition:
  - c. Without brace?
  - d. Desired functional benefit from brace?
6. Document pain level: 0-10
7. Past or current experience with orthosis - brace successful / failed and **why**. State N/A if necessary.
8. Status of current orthosis and reason for replacement (broken, poor fit, functional requirement)?
9. Weight, height, and or loss/gain.
10. Musculoskeletal examination:
  - e. Specifically describe spinal deficits.

Note:

Documentation needed     = Documentation received or already noted in chart note/addendum