

Detailed Written Order

Lumbosacral Orthosis – LSO (L0648)

Date _____

Patient: _____ DOB: _____

DURABLE MEDICAL EQUIPMENT: LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, OFF-THE-SHELF

HCPCS CODE: L0648

DIAGNOSIS:

- | | | |
|--|--|--|
| <input type="checkbox"/> Low back pain: M54.5 | <input type="checkbox"/> Sciatica: M54.30 | <input type="checkbox"/> Spinal Stenosis: M48.06 |
| <input type="checkbox"/> Muscle spasm: M62.40 | <input type="checkbox"/> Disc Degeneration, Lumbar: M51.36 | <input type="checkbox"/> Spinal Instability: M53.2X7 |
| <input type="checkbox"/> Ligamentous Instability: M24.20 | <input type="checkbox"/> Disc Herniation, Lumbar: M51.26 | <input type="checkbox"/> Kyphosis: M40.00 |
| <input type="checkbox"/> Radiculopathy, Lumbar: M54.16 | <input type="checkbox"/> Lumbosacral Sprain, Initial: S33.5XXA | <input type="checkbox"/> Spondylolisthesis: M43.10 |
| <input type="checkbox"/> Other (include ICD-10 code) _____ | | |

ONSET OF DIAGNOSIS: _____

INDICATIONS AND EXPECTED BENEFITS (check all appropriate):

- Reduce pain by restricting mobility of the trunk
- Facilitate healing following injury to the spine or related soft tissues
- Facilitate healing following a surgical procedure on the spine or related soft tissue
- Support weak spinal muscles and/or a deformed spine
- Additional: _____

Length of Need (in months, 99=Lifetime): _____ Frequency of use: ___/times per day ___/hours ___/minutes

Prognosis: Good Fair Poor

Utilizing accepted standards of medical practice, the above-prescribed durable medical equipment is essential in the continuous treatment of this patient.

Additional Notes:

Insert HCPCS Sticker

Signature & Credential: _____

Printed Name: _____

Date: _____ NPI: _____