

B O D Y P O I N T D E S I G N S

LADYBUG/TURTLE LETTER OF JUSTIFICATION OUTLINE

Date

Insurance Carrier

Attn: Medical Review/ Authorization

Address

Re: Client's Name

SS#

"Policy" or "Account" #

Dear (Medical Consultant, VR Counselor, Personal Care Rep, Special Ed Dir., etc)

***** is a ** year old male/female with a diagnosis of ***. He/she lives in (home setting) with (state the level of) support. Due to these factors he/she demonstrates (list identified problems), when attempting to achieve a functional sitting position. This creates functional limitations as he/she (is unable to achieve sufficient head/ arm control required for activities of daily living/ group activities/ therapy sessions, inhibits breathing/ digestion/ circulation, developing contractures/ stiffness/ pain), and is unable to complete his/her therapy session goals.

A 'Ladybug/Turtle' prone angle long sitter is needed for ***** in order to facilitate a symmetrical functional position while attending to functional tasks. The 10°- 20° of anterior tilt at the hip that is achieved with the Ladybug/Turtle encourages ***** to reach and extend forward, which develops and improves head, neck and upper body muscle control.

The Ladybug/Turtle creates a stable position for ***** during functional tasks in order to prevent deformities and facilitate normal skeletal and muscle development. The Ladybug/Turtle also achieves the long sitting position that assists with the prevention of knee tightening and subsequent loss of range of motion by creating a sustained hamstring stretch, due to *****'s high muscle tone and flexion pattern.

The Ladybug/Turtle comes standard with the unique **patented design Multi-grip hip support** that positions and holds ***** like a therapist's hands. This extends his/her sitting tolerance during therapy sessions. The supported sitting that is achieved with Ladybug/Turtle assists in the inhibition of *****'s abnormal reflex patterns and improves systemic functions; i.e. respiratory, digestion and circulation.

***** requires the padded and adjustable **abduction block** in order to facilitates a stable hip position due to his/her high/low tone.

***** also requires **the activity tray**, which is angle, height, and depth adjustable for upper extremity support while seated to facilitate an upright posture. **The padded lateral supports** are required to provide thoracic support due to poor muscle control and ataxic movements. All these items are included in the price of the chair and are fully adjustable to meet the specific needs of ***** in his/her home setting.

Alternative devices have been tried/ considered (*name devices e.g. pillows/ sand bags/ wedge/ bolsters/ floor sitters*) but failed to provide sufficient support to achieve a constructive upright sitting position or functional upper extremity and head control, and failed to prevent a destructive sitting position with (*windswept/ spastic muscle tone/ involuntary muscle spasm/ knee flexion*). There is no other device available that has the Multi-grip hip supports or that is able to achieve the anterior tilt at the hip, while at the same time facilitating a sustained hamstring stretch. Therefore the Ladybug/Turtle is the least costly long-sitter that fulfills *****'s needs.

The Ladybug/Turtle prone angle long sitter is age appropriate and is accepted by ***** , and his/her parents and peers. Due to the ease of operating the Ladybug/Turtle, *****'s caregivers have been able to be trained to position him/her correctly in the sitter in order to continue the therapeutic benefits in the home setting. All products that are distributed by Bodypoint Designs carry an unconditional guarantee against defects in workmanship and materials.

The above item is medically indicated and necessary for ***** to use as part of a rehabilitation plan designed to increase his/her functional abilities and to prevent medical complications.

Please review the attached supporting documentation. (*E.g., photos, videos, assistive technology assessment, price quotation from vendor, letters/opinions of medical necessity from specialists, brochure or other information showing device- BP has a Jenx video*).

Please feel free to call or write if you have any questions regarding this prescription.

Sincerely,