

NHIC

National Heritage Insurance Company

12545 Riata Vista Crossing

Austin Texas 78727

(512) 343-4900

An EDS Company

Date: _____

From: _____

Re: _____

All Criteria Must Be Met For Low Air Loss Beds and Mattresses:

1. Has there been any prior history of hospitalization(s) for flap surgery for pressure sores or has the patient had a hospital admission for pressure sore treatment within the past 9 months?

2. A. Does the patient currently have stage 3 or 4 pressure sores (describe size in cm (width, depth, length and dimension), location of sore(s), number, stage, and treatment).

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B. Include response to traditional pressure sore care such as Air Crate Mattress, pressure reducing over lays, mattresses and positioning devices. _____

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3. A. Does the patient have limited mobility due to an illness, please explain if this patient is bed bound or wheel chair dependent. _____

B. List current medical diagnosis. _____

4. Is the patient able to get out of bed or sit in wheel chair? _____

5. Who will be involved in patient's home care plan, to turn, position the patient and utilize the LALB effectively? _____