

Durable Medical Equipment

Specifically ambulatory aids: their prescription, fit, and
procurement

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August 7, 2018

DISCLOSURES

None of the faculty, planners, speakers, providers nor CME committee has any relevant financial relationships with commercial interest
There is no commercial support for this CME activity



Objectives

- Identify and describe various ambulatory aids used in the hospital setting
- Know basic fitment of said ambulatory aids
- Understand insurance/payor issuance

Durable Medical Equipment (DME) is any equipment that provides therapeutic benefits to a patient in need because of certain medical conditions and/or illnesses.

–Blue Cross/Blue Shield website

Ambulatory Aids

- Front Wheeled Walkers (FWW) with and without platforms
- Four Wheeled Walkers (4WW) with and without baskets
- Canes: Single point (SPC) or four/multiple point (WBQC, NBQC) with and without flower print
- Crutches: American and European/forearm/Lofstrand
- Wheelchairs: standard, lightweight/ultralightweight, power

Ambulatory Aids cont.

- Prostheses and orthoses: prosthetic limbs, FO, AFO, KAFO, HKAFO...etc.



- Knee scooters
- Et cetera...



DME Prescription

- Ambulatory aids are prescribed based on patient-specific need, not diagnosis
- Unfortunately payors/insurance are often limited by diagnosis

DME Prescription cont.

Moving from least restrictive to most restrictive

- AFOs: used for dorsiflexion limitation/weakness and mild plantar flexion contractures
- Often used in conjunction with other ambulatory aids
- Common diagnoses: stroke, low level spinal cord injury, nerve root impingement, cerebral palsy, spina bifida...



DME Prescription cont.

- Single point and multipoint canes: used for single UE support during transfers and ambulation
- Not generally used for LE weight bearing limitations
- Quad cane offers more stability at a cost of increased bulk and weight. Side specific!



DME Prescription cont.



- Crutches: American and forearm
- Generally used for short term weight bearing limitations or painful weight bearing
- Require significant UE strength and balance
- May be used to climb and descend stairs
- Lofstrand/forearm crutches require more UE strength and stability, generally use for longer term

DME Prescription cont.

- FWW, 4WW, hemiwalkers
- LE weight bearing limitations (and some UE), impaired balance/proprioception, incomplete paraplegia, hemiplegia*, energy conservation (4WW), furniture walking...etc
- Platform walker may be used with single LE and distal UE(s) weight bearing restrictions or weakness
- Pickup walkers are sometimes suitable



DME Prescription cont.

- Wheelchairs: manual and power et al
- Multiple limb injuries, spinal cord injuries, congenital disabilities, severe activity intolerance...etc
- May be used short term, long term, or lifelong.
- Sling seat for short term or infrequent use, lightweight with appropriate cushion for long term/lifelong use
- Power chair for high level spinal cord injuries, severe activity intolerance



DME Sizing

- Once you've selected the proper piece of equipment, it must be sized for the patient
- Poorly fit DME is often a source of injury





Prosthesis/Orthosis Fit

- Prostheses and orthoses can be purchased or issued OTC or may be custom fit to the patient based on need
- Custom devices will likely require a physician's order to be fit by a trained prosthetist

Handheld DME Sizing

- FWWs, 4WWs, hemiwalkers, canes, crutches* are all sized similarly
- The handle or grip should be positioned at the wrist crease
- Crutches have two places to size
- Platform walkers and knee scooters should allow the patient to remain in an upright and anatomically correct position



Wheelchair sizing

- Generic regular, narrow, bariatric, or pediatric sling seat wheelchairs are often appropriate for short term use.
 - High risk for skin breakdown with prolonged use!
- For long term or lifelong use a custom wheelchair with an appropriate cushion will need to be ordered by the physician with measurements performed by a trained professional (preferably the same location that will procure the wheelchair)
- Users need to be able to reach wheels comfortably to prevent shoulder injury

DME Fit Demo

Common Insurer Policies

- IEHP
 - Will provide DME for *immediate need* when discharged from hospital
 - One ambulatory device
 - Will pay for shower chair *and* commode
 - Knee scooter, power chair, custom wheelchair and other non-emergent DME must be ordered by PCP

Common Insurer Policies

- Medicare
 - Will pay for two (2) ambulatory devices every 5 years
 - Shower chairs and knee scooters not covered
 - Must have physician prescription with applicable diagnosis
 - Hospital bed and wheelchair require specific documentation
 - Provided through Medicare licensed DME provider: Gallant

Common Insurer Policies

- Medi-Cal
 - Emergent items will be provided at hospital discharge
 - Physician order with physical therapy notes for ambulatory equipment
 - Knee scooter can be covered when ordered from an ortho specific DME provider (not Supercare!)
 - Treatment Authorization Request (TAR) must be submitted for each item ordered. Forms for wheelchair and walker must go out different days

Questions?

References

1. O'Sullivan SB, Schmitz TJ. Locomotor Training. In: Physical Rehabilitation. 5th edition. Philadelphia, PA: FA Davis Company; 2007: 541-557
2. Pasquini SM, Peterson ML, Rattansi SM, et al. The Impact of Assistive Device Prescription on Gait Following Total Knee Replacement. Journal of Geriatric Physical Therapy. 33(2):64-70, APR 2010

Please feel free to contact Alicia with any questions you may have.

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