

## Physician Prosthetic Assessment

When you refer Medicare patients for prosthetic care, a smooth transition can improve your patient's experience. In an effort to help reduce the risk of inconvenience, delays and unnecessary cost to your patients, we have included an outline of the five pieces of information needed to ensure the prosthetic notes are corroborated in the medical record.

1. Patient's amputation level and any co-morbidities related to ambulatory status.
2. Documented confirmation that patient has the desire to function with a prosthesis.
3. Documented confirmation that patient has or will have the ability to function with a prosthesis.
4. Patient's **current and expected** Medicare Functional Level as one of the following:

K4	HIGH ACTIVE ATHLETIC AMBULATOR: Has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills: high impact, stress, or energy levels.
K3	COMMUNITY AMBULATOR: Has the ability or potential for ambulation with variable cadence, to traverse most environmental barriers, and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion.
K2	LIMITED COMMUNITY AMBULATOR: Has the ability or potential for ambulation and to traverse low level environmental barriers such as curbs, stairs or uneven surfaces
K1	HOUSEHOLD AMBULATOR: Has the ability or potential to use prosthesis for transfers /ambulation on level surfaces at fixed cadence

5. Provide specific examples to validate your opinion as to why the patient meets the standard of the expected functional level you have selected, for example:

### EXAMPLE OF A K4 VALIDATION STATEMENT

The patient is an active athlete ambulator participating in activities such as skiing, high impact sports and long distance running.

### EXAMPLE OF A K3 VALIDATION STATEMENT

The patient has the potential to be a community ambulator and walks at varying speeds in the community on a regular basis for activities of living such as shopping, and attending community services and events. Patient requires the ability to change speeds while walking in public places and also will be required to walk on uneven surfaces such as grass, gravel, curbs, ramps and stairs.

### EXAMPLE OF A K2 VALIDATION STATEMENT

This patient is a limited community ambulator living in a home that has entrance stairs as well as stairs, steps and floor rugs causing uneven surfaces inside the home.

### EXAMPLE OF A K1 VALIDATION STATEMENT

This patient is a household ambulator who resides in an assisted living home and walks indoors with the aid of a walker.

Please evaluate this patient and document the 5 key required pieces of information and place it in the patient's permanent medical record.

The attached Physician Prosthetic Assessment (PPA) form is a tool to assist with Medicare prosthetic care documentation

Upon completion of the PPA form, place the original in the medical records and send a copy to the prosthetic care provider.