October 15, 2009

To Whom It May Concern:

We are following Manachem in our Pediatric Clinic here at "ABC Rehab". His most recent evaluation was on 07/14/2009. Manachem is a 9-year-old boy with progressive muscular weakness due to Duchenne Muscular Dystrophy (DMD). Manachem currently weighs 55 lbs and is 53 inches tall. He presents with weakness in all four limbs, ankle weakness, bilateral heel cord tightness and an increased lumbar lordosis. He requires assistance for all transfers. He is no longer able to walk functional distances, despite the use of a walker. He walks with increased lumbar lordosis and hip flexion, no heel strike bilaterally, toes walking with slight inversion. He is having increased difficulty managing a rolling walker, cane or other assistive devices due to his arm weakness even with assistance from his caregivers. He is unable to walk more than half a city block and complains of fatigue. Manachem's ability to walk is therefore unsafe and non-functional. He is unable to self-propel in a manual wheelchair secondary to his upper extremity weakness and decreased endurance and requires assistance to advance a manual wheelchair. This increase in weakness and fatigue has resulted in a reduced ability to participate in learning activities in his environments, especially at school. Avoiding physically stressful situations is essential to Manachem's academic and environmental success.

He has mobility limitations that impair his ability to participate in mobility related activities of daily living (MRADL) that cannot be sufficiently and safely resolved by the use of a cane or walker, and he does not have sufficient upper extremity function to self-propel an optimally-configured manual wheelchair to perform MRADLs during a typical day. He does not meet the criteria of a POV secondary to not being able to safely transfer on and off a scooter. He is unable to maintain postural stability and positioning in standard POV seating secondary to needing the use of additional positioning.

Manachem has trialed a Pride Mobility power wheelchair in our clinic on 09/25/2009. He has not expressed an unwillingness to use a power wheelchair. He was able to independently use all of the power features (drive and tilt) successfully without any concerns. This allowed him to safely negotiate his environment independently without the risk of him fatiguing. He has the functional ability to use the standard drive controls through the joystick along with the adequate cognition, visual ability and judgment necessary to safely operate a power wheelchair. His weight is less than the weight capacity of the power wheelchair. Manachem has wheelchair accessible transportation available to him by using his family's accessible vehicle and an accessible school bus. His family has an accessible home with adequate access between rooms, in and out of the home, maneuvering space, over surfaces and a secure storage for the operation of a power wheelchair to support his needs for transportation in the home, to/from classes during school and to prevent fatigue so he can actively participate. As stated above, Manachem is no longer able to ambulate functional distances safely and does not possess the necessary upper extremity strength or pulmonary endurance to propel any kind of manual wheelchair.

BioDynamics: Solid back insert with 1.5" soft summate foam and neoprene detach cover attaching hardware; with adjustable swing-away lateral trunk supports - A posterior positioning back is required to correct and accommodate the postural asymmetries of the thoracic and lumbar spine which result from muscle weakness, poor motor control and impaired balance due to the diagnosis of DMD. Swing-away lateral trunk supports are required to prevent lateral flexion and to promote proper seating alignment. They are required because of Manachem's decreased trunk tone and control. Removable lateral thoracic support brackets are required to allow removal of the support pads for safe transfers, personal care, repositioning and functional activities. Lower-level, less expensive backs won't suffice and meet the requirements of Manachem's positional needs.

BioDynamics Positioning Cushion 2' soft summate with growth tail; detach neoprene cover; Velcro to pan – Manachem is unable to carry out a functional weight shift due to his diagnosis of DMD. He will be confined to his wheelchair for more than 4 continuous hours on a daily basis when at school. He has significant postural asymmetries due to his diagnosis of DMD and is unable to perform an adequate weight shift secondary to his weakness. He requires a seat cushion with sufficient pressurerelieving capabilities to maintain intact skin integrity and to allow for functional sitting tolerance. This cushion provides the proper combination of pressure relief and positional support necessary for him in his power wheelchair. The 14" x 16" seat cushion is needed to accommodate his body frame size, specifically narrow width and long femur length. Lower-level, less expensive cushions won't suffice and meet the requirements of Manachem's positional needs.

BioDynamics 1'' thick hip guides, attach to arm with loop hardware; full depth – This is required to prevent Manachem's legs from abducting to a position wider than the wheelchair and will maintain him in proper hip alignment while operating the wheelchair.

BioDynamics Upper Extremity Support surface – A removable upper extremity support surface is required because it will allow Manachem to perform table top and functional activities while seated in the chair, Manachem's medical need for upper extremity support positioning in a wheelchair cannot be met with less costly alternatives.

Currently Manachem is unable to negotiate his environments safely and independently. Manachem's mother and father are his caregiver support in the home. They assist him for many activities of daily living. They are both there to support Manachem's needs, especially if any need arises while using his power wheelchair. Manachem has teachers in his school who provide caregiver support as well. Manachem will be able to reposition himself independently during the school day by using the tilt function of his power wheelchair. By tilting backwards, Manachem is able to relieve pressure, weight shift and reposition himself in a more upright position independently. If Manachem does not receive a power mobility device, such as the Quantum 600, his ability to perform mobility related activities of daily living in the home and/or community is significantly impaired. Due to Manachem's progressive muscle degeneration, limitations of strength, endurance, range of motion, decreased lung capacity, inability to lift his arms, legs and trunk, or move at all on his own, it is medically necessary for Manachem to receive a power wheelchair. Anything you can do to ensure that Manachem receives this very necessary equipment would be greatly appreciated. Please do not hesitate to contact us with questions or comments at 555-5555

Sincerely,