PHYSICIAN ORDER – DURABLE MEDICAL EQUIPMENT

4301 Northstar Way, Suite C
Modesto, CA 95356
(877) 799-0202

Home Oxygen Co., LLC
*Your **ACO** Partner in Health*

4049 N. Freeway Blvd.
Sacramento, CA 95834
(877) 799-0202

FAX: 888-499-0202

Patient Name:_____ Date of Birth:_____

Address:_____ Contact Phone:_____

Primary Insurance: _____ Secondary Insurance: _____

DX: COPD(dx:_____) Emphysema(dx:_____) CHF(dx:_____) Asthma(dx:_____)

OSA(dx:_____) Chronic Bronchitis(dx:_____) Other:(dx:_____)_____

Length of Need: _____# months (lifetime is 99) ***DATE:***_____

Durable Medical Equipment

Height:_____ Weight:_____ *Weight Limits indicated next to product name

AMBULATION

- ☐ Cane(250)
- ☐ Quad Cane(250)
- ☐ Crutches(350)
- ☐ Walker w/ Wheels(300)
- ☐ Hemi Walker(250)
- ☐ Platform Attachment(300)
- ☐ Forearm Crutches(300)

BATH SAFETY

- ☐ Commode(300)
- ☐ Drop-Arm Commode(250)
- ☐ Shower Chair(315)
- ☐ Transfer Bench(315)
- ☐ Elevated Toilet Seat(300)

BEDS/TSS

- ☐ Hospital Bed - Fixed Height(350)
- ☐ Hospital Bed - Semi-Electric(350)
- ☐ Low Air Loss(350)
- ☐ Trapeze Bar(250)
- ☐ Patient Lift(450)
- ☐ Gel Mattress(275)

WHEELCHAIR

- ☐ Wheelchair(250) 16" 18"
- ☐ Reclining W/C(250) 16" 18"
- ☐ Standard Footrests
- ☐ General Use Cushion
- ☐ General Use Back
- ☐ Elevating Leg Rests

Heavy Duty/BARIATRIC

- ☐ Pick-up Walker(500)
- ☐ Pick-up Walker(700)
- ☐ Single Point Cane(700)
- ☐ Walker w/ Wheels(500)
- ☐ Walker w/ Wheels(700)
- ☐ Commode(450)
- ☐ Quad Cane Narrow(700)
- ☐ Quad Cane Wide(700)
- ☐ Shower Chair(700)
- ☐ Commode(650)
- ☐ Shower Chair(400)
- ☐ Wheelchair 20" Wide(300)
- ☐ Transfer Bench(400)
- ☐ Transfer Bench(700)
- ☐ Trapeze Bar(1000)
- ☐ Wheelchair 22" Wide(350)
- ☐ Wheelchair 24" Wide(450)
- ☐ Hospital Bed(600)
- ☐ Hospital Bed(750)
- ☐ Low Air Loss/Alt Pressure Mattress(1000)

Address: _____ City/State_____

NPI#: _____Physician Fax:_____

Physicians Name: _____Physician Signature: _____Date#_____

SUBMIT