



GUIDELINES FOR USE OF  
**DURABLE  
MEDICAL  
EQUIPMENT**  
FOR PERSONS WITH SPINAL  
CORD INJURY AND DYSFUNCTION

2 0 2 2   E D I T I O N

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Durable Medical Equipment for Persons with Spinal Cord Injury or Dysfunction:  
2022 Manual Update

We thank those who gave time and effort to this project for sharing their expertise willingly to enhance the lives of those with spinal cord injury or dysfunction. We would also like to thank all of the contributors to past versions of this manual.

The American Spinal Injury Association (“ASIA”) has made this guide available to provide information to the spinal cord injury community. Reference in this guide to any product or service does not constitute or imply an ASIA endorsement or recommendation of such product or service. While ASIA has made every effort to include accurate information in the guide, ASIA has not investigated or tested any of the products or services mentioned in the guide, and it does not guarantee the accuracy, completeness, efficacy, or timeliness of such products or services. ASIA is not responsible for, and expressly disclaims all liability for, any damage, injury or other loss of any kind arising out of use of or reliance on such products or services, or any defect in or failure of any product or service or any misrepresentation or omission made in connection with such product or service. No guarantees or warranties, including (but not limited to) any express or implied warranties of merchantability or fitness for a particular use or purpose, are made by ASIA.



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# INTRODUCTION

Spinal cord injury or dysfunction (SCI/D) can lead to impairments in movement and sensation, which can impair not only the function but also quality of life of an individual. Due to these impairments, Durable Medical Equipment (DME) is an essential component of medical care for persons with SCI/D. Appropriate prescription and training for use of DME can improve independence, autonomy, community engagement, community participation, and ease and spontaneity of functioning. For this reason, the American Spinal Injury Association (ASIA) assembled a committee of expert clinicians working with persons with SCI/D to review the current state of the art for this area, and update the Durable medical Equipment document produced many years ago. This document is a result of extensive literature searches, including peer-reviewed medical, nursing and therapy resources, conducted to determine accepted standards of medical practice with respect to the provision of DME. The result describes the categories of equipment that are essential, or helpful, for the person with SCI/D to function as independently as possible in the home or community environment.

What is durable medical equipment or DME (as it is commonly referred to)? Generally speaking, CMS (Center for Medicare and Medicaid Services) describes DME as any medical equipment used in the home environment to aid in the better quality of life. DME plays a significant role in determining the level of independence for the individual using the equipment. Medical insurances, whether public or private, do cover the cost of some, but not necessarily all, types of DME. All funding resources should be considered including primary and secondary insurance plans, as well as self pay and fundraising options.

For an individual with SCI/D, the amount and specialization of durable medical equipment can vary from very simple and inexpensive to highly complex and very expensive. As SCI usually refers to traumatic spinal cord injury, SCD refers to spinal cord dysfunction, which may present either as a non-traumatic spinal cord injury, multiple sclerosis, or Guillain-Barre Syndrome, etc. The information

presented in this document relates to the needs of any of these individuals, with the hope that their function may be augmented by the use of DME.

The purpose of this document is to provide information about DME, as it relates to the general and specialized needs of persons with SCI/D. In doing so, the document describes the available DME that may meet the complex needs of individuals with SCI/D throughout the continuum of life. As an individual with a disability ages, a change in medical and functional status may be accompanied by differing DME needs. Comorbidities (such as amputation, multi-trauma, dual diagnosis traumatic brain injury and lack of safety consciousness, etc) may also alter the prescription or componentry considered appropriate for an individual's use. And not all equipment is necessary for every individual with SCI/D. The information provided and recommendations on types of equipment within this document are not intended to be prescriptive but rather to serve as a guideline. Each individual should be evaluated to determine their individual functional status, prognosis, environmental considerations and caregiver and financial resources when outlining a comprehensive DME recommendation.

Throughout this document, special attention has been given to what is considered medically necessary or medically beneficial. Medically necessary has been defined as "referring to a covered service or treatment that is absolutely necessary to protect and enhance the status of a patient and could adversely affect the patient's condition if omitted, in accordance with accepted standards of medical practice"

The definition of "medically necessary" used in this document is similar to how it is defined by major medical insurance companies. "Medically necessary durable medical equipment" is that equipment which an interdisciplinary healthcare team recommends or provides to an individual for the purpose of evaluating

and treating an injury, disease or symptom, is clinically and medically appropriate for the person's diagnosis, and is in accordance with accepted standards of medical practice. DME is also considered necessary when it has the capacity to prevent present conditions from deteriorating, decrease a person's pain or discomfort, and improve a person's function. The term "medically beneficial" is used in this document for the purpose of describing DME which may not be necessary to sustain life or safety, but may prevent degradation of impairment, augment an individual's efficiency and ease of functional skills even further, decrease caregiver burden of care, and contribute to the health and wellness of those individuals with SCI/D.

Letters of medical necessity (LMN) may be required or helpful for both public and private funding sources to justify certain pieces of DME as both medically necessary and/or medically beneficial to an individual. The sample LMNs that are included at the end of this manual are meant to serve as **EXAMPLES ONLY** to help justify specific prescriptions of specialized DME. Each LMN should be individualized to the person being served, including information on

alternatives tried and why they are not appropriate as well as specific reasons for this piece of equipment and necessary componentry. These should not be used as "template" letters.

The pictures and website links that are utilized in this manual are NOT intended as an endorsement or advertisement for specific models or products, but merely as an illustration of that category or type of equipment. No one brand or type of equipment is appropriate for all persons with SCI/D, and a thorough evaluation should be completed to determine what piece is the "best fit" for that individual.

As the DME market is in a constant state of change, this document will be reviewed and revised on a regular basis. Throughout the continuum of life, the individuals' physical condition, functional status, caregiver availability and environmental factors will also fluctuate and may influence changes to the need for DME. It is hoped that the information presented in this document can be used as a basis for equipment evaluations and prescriptions for persons through their lifetime following SCI/D.