

CLINICIAN CHECKLIST FOR TRANSCUTANEOUS ELECTRICAL NERVE STIMULATOR (TENS) CONDUCTIVE GARMENT

Policy References:

- [Local Coverage Determination \(LCD\) \(L33690\)](#)
- [Policy Article \(A52458\)](#)

Documentation References: [Standard Documentation Requirements Policy Article \(A55426\)](#)

The treating clinician must complete the following items:

[Standard Written Order \(SWO\)](#)

Medical records as noted below

Medical Documentation

One of the medical indications outlined below must be met if ordering a conductive garment to be used with a Medicare covered TENS unit:

Beneficiary cannot manage without the conductive garment because:

There is such a large area or so many sites to be stimulated; **and**

The stimulation would have to be delivered so frequently that it is not feasible to use conventional electrodes, adhesive tapes, and lead wires.

Beneficiary cannot manage without the conductive garment for the treatment of chronic intractable pain because the areas or sites to be stimulated are inaccessible with the use of conventional electrodes, adhesive tapes, and lead wires

Beneficiary has a documented medical condition, such as skin problems, that preclude the application of conventional electrodes, adhesive tapes, and lead wires

Beneficiary requires electrical stimulation beneath a cast to treat chronic intractable pain