The supplier must be able to provide all of these items on request:

- Standard Written Order (SWO)
- Beneficiary Authorization
- Proof of Delivery (POD)
- Continued Need
- Continued Use
- Medical records from treating practitioner as noted below

**Medical Records should contain:**

Medical records supporting the beneficiary meets at least one of the following criteria:

- **Criterion 1**
  - Multiple stage II pressure ulcers located on trunk or pelvis which have failed to improve over the past month (Refer to LCD for ICD codes); **and**
  - Beneficiary has been on a comprehensive ulcer treatment program for at least the past month (minimum 30 days) which included each of the following:
    - Use of an appropriate group 1 support surface; **and**
    - Regular assessment by a nurse, physician, or licensed healthcare practitioner; **and**
    - Appropriate turning and positioning; **and**
    - Appropriate wound care; **and**
    - Appropriate management of moisture/incontinence; **and**
    - Nutritional assessment and intervention consistent with overall plan of care

- **Criterion 2**
  - Large or multiple stage III or IV pressure ulcer(s) on trunk or pelvis (Refer to LCD for ICD codes).

- **Criterion 3**
  - Recent (within past 60 days) myocutaneous flap or skin graft for a pressure ulcer on the trunk or pelvis (Refer to LCD for ICD codes); **and**
  - Beneficiary has been on a group 2 or 3 support surface immediately prior to a recent discharge from a hospital or nursing facility (discharge within the past 30 days). In this instance, coverage is generally limited to 60 days from the date of the surgery.