

# **PCFX – Spinal Surgery Precertification Information Request Form**

Member name: Michael Turner

Reference number: PA-APR-445566

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Member ID: AET99887766

DOB: 02/12/1968 | Phone: 555-222-3344

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## **Section 1: Precertification Department Information**

Requesting Provider / Facility: Advanced Spine & Neuro Institute

Facility NPI: 1098765432

Phone: 555-888-1212 Fax: 555-888-1313

Referring Physician: Dr. Rebecca Lawson, MD

## **Section 2: Assistant / Co-Surgeon**

Assistant Surgeon: Dr. Thomas Nguyen, MD (NPI 2233445566)

Modifier: 80 | CPT Codes: 22630, 22842

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### Section 3: General Surgical Questions

Requested admission type:  Inpatient  Outpatient

Requested Date of Surgery: 04/10/2026

Redo / Revision Surgery:  Yes  No

ICD-10 Diagnosis Codes: M48.062 (Lumbar stenosis), M54.16 (Radiculopathy)

### Section 4: Conservative Therapy (Completed)

Formal physical therapy completed within last 12 months

PT Duration: 12 weeks (09/2025 – 12/2025) with documented failure

Discharge note from licensed physical therapist included

Additional conservative care: NSAIDs, epidural steroid injections x3

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### Section 5: Procedure Details (Cervical/Thoracic/Lumbar)

Procedure Description: Lumbar decompression with instrumented fusion

Levels of Surgery: L4–L5, L5–S1

CPT Codes Requested: 22630, 22632, 22842

ACDF

ALIF

PLIF

TLIF

XLIF

OLIF

PCDF

Disc Replacement

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### **Section 6: Instrumentation and Bone Grafts**

Posterior Instrumentation:

Manufacturer: Medtronic

Device Name: Solera Pedicle Screw System

CPT / HCPCS Code: 22842

Bone Graft (Allograft):

Manufacturer: Allosource

Product: Allofuse DBM

100% bone material

Contains stem cells or non-bone material

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### Section 7: Neuromonitoring

- Intraoperative neuromonitoring will be used
- Surgeon billing for neuromonitoring

CPT Codes: 95940, 95941

### Section 8: Location and Risk Stratification

- Inpatient hospital setting
- Outpatient hospital / ASC / Office
- ASA Physical Status III
- BMI > 35 with comorbidities
- Unstable cardiac / respiratory conditions

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### Section 8 (continued): High-Risk Medical Conditions

- Recent myocardial infarction (<90 days)
- Uncontrolled epilepsy or stroke
- Obstructive sleep apnea (moderate, on CPAP)
- Bleeding or clotting disorder

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### **Section 9: Required Documentation Submitted**

- Comprehensive clinic notes and neurological exam
- Formal physical therapy notes with outcomes
- MRI lumbar spine (02/2026)
- CT lumbar spine
- Conservative therapy summary
- Current plan of care

### **Section 11: Attestation and Signature**

Signature of person completing form: Dr. Rebecca Lawson, MD

Date: 03/18/2026

Office Contact: Laura Chen | Phone: 555-777-9090 | Fax: 555-777-9191