

Rx



Date: / \_\_\_\_\_ / \_\_\_\_\_ Patient Dr. License #: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone NPI #: \_\_\_\_\_  
Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ / \_\_\_\_\_

**COMPRESSION STOCKINGS**

- Class I 18-30 mmhg       Thigh High  
 Class II 30-40 mmhg       Pantyhose

Diagnosis: \_\_\_\_\_ Quantity:  Refills:

**SUPPORTERS**

- Prenatal / Postpartum Girdles / Belts  
 Vulva Support Perineal Binder  
 Posture / Back Support  
 Neck Brace  Elbow Brace  Wrist Brace

Diagnosis: \_\_\_\_\_ Quantity:

**DOUBLE ELECTRIC BREAST PUMP & BAGS**

**HAND PUMP**

Diagnosis: \_\_\_\_\_

**Suggested Diagnostic Codes:** i83.813-varicose veins of bilateral lower extremities with pain i87.2-venous insufficiency i83.90-asymptomatic varicose veins of lower ext. m79.606-pain in leg r60.9-edema o22.00-varicose veins of lower ext. in pregnancy z34.90-supervision of normal pregnancy m54.4-low back pain m54.30 sciatica m62.81-muscle weakness i86.3-vulvar varicosities z39.2-encounter for routine postpartum follow-up z39.1-encounter for care and examination of lactating mother g56.00-carpal tunnel syndrome m25.52-pain in elbows 16.1xxa-neck strain