Keeping Safe from Injury

for Children with Special Needs

CHILDREN'S HOSPITAL
& RESEARCH CENTER OAKLAND

KOHL'S Cares®
Committed to Kids' Health and Education

Keeping Safe from Injury for Children with Special Needs

Presented by the Trauma Services Department

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In 2005, we began a collaboration with Kohl's, "Kohl's Cares" program and in 2008 our program became known as the Kohl's Injury Prevention Program. The focus of this program is to develop strategies to increase parents' knowledge about how to prevent injuries. Through this partnership, we are able to provide this safety booklet as well as many other educational materials and safety devices for families in the community.

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Designed by Children's Hospital & Research Center Oakland Marketing Communications Department.

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Your child has been diagnosed as having "special needs." What does this mean?

Children with special needs are those who have or who are at increased risk for a persistent physical, developmental, behavioral or emotional condition, and who require services beyond those required by children generally. (Merle McPherson, MD, *Pediatrics*, July 1998)

Why is your child different from other children?

Your child is no different than any other child, except that he or she needs the right tools to achieve a life of quality and satisfaction, and to be fully included in your community.

If you feel isolated, you are not alone.

Nine million American children under 18, about 13 percent, have a special healthcare need (Safe Kids). Children with special needs are more like other children than unlike them. All children need to be cared for, loved and supported.

Keeping your child safe from injury

We know that children with physical, psychological, cognitive, emotional or social special needs have much higher rates of injury. This may be partly due to a lack of prevention education.

We hope the following information will help you keep your child safe from injury.

In the following pages you will find:

- Keeping your child safe from falls, choking and fire
- Keeping your child safe in cars if your child has:
    - Behavioral challenges, autism, ADHD or cognitive impairment
    - Cerebral palsy
    - Down syndrome
    - A spica cast
    - A special medical condition
- A summary of car seat options
- Car safety while in the car
- Preparing for emergencies and disasters
- How to obtain a Letter of Medical Necessity
- Letters of Medical Necessity samples
- Resources

Keeping Safe: **From falls, choking and fire**

Keeping Safe From Falls

Caregivers often assume that children with limited mobility are not at risk for falling. Your child should never be left unsupervised because he could possibly roll or creep to danger. Even a fall from a bed or low elevated surface can cause injury. Your child should also be carefully watched at the playground. He should have developmentally appropriate play equipment, and a soft surface to walk, crawl or slide on. Children with seizure disorders may need to wear a helmet during play, and especially in the shower.

Keeping Safe From Choking

Children with special needs are more at risk for choking. Make sure you remove all strings from your child's clothes, and cover Band-Aids with clothing. Do not allow your child to play with latex balloons. They may bite it and choke on the pieces. Clean the floor carefully. Food that has been dropped or loose pieces from an older child's game may become choking hazards if your child puts them in his mouth. Cut food into small pieces, and make sure your child is sitting upright and supported when eating, or being fed.

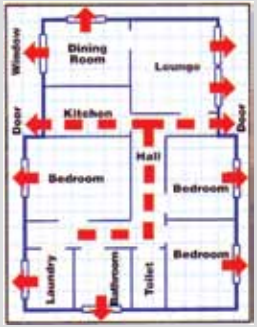
Keeping Safe From Fire

Install smoke detectors outside each bedroom. Change the batteries when you adjust your clock every spring and fall. If possible, children should be taught how to stop, drop and roll. If your child cannot crawl or walk, keep a blanket or scooter board nearby. In case of fire, secure your child to the board or inside the blanket, and drag your child to safety. If a child doesn't speak, it may help to

keep a bell or whistle in the room so he can alert you in case of danger. Every family should plan and practice an escape route from their home in case of fire. Practice using a buddy system if your special needs child has brothers or sisters. All children should be taught what a fireman wears (equipment and mask) so they do not become frightened and hide in an emergency. The fire department closest to your home should be contacted to let them know there is a child with special needs at your address. They should be advised if there is an oxygen tank in the home, any special equipment in use, such as a ventilator, and if the child is mobile.

INSIDE TIP

Remember to change the batteries on your smoke detector when you adjust your clock every spring and fall.



Every family should plan and practice an escape route from their home in case of fire.

Car Safety: **If your child has behavioral challenges, autism, ADHD (Attention Deficit Hyperactivity Disorder) or cognitive impairment**

Children showing signs of behaviors such as impulsiveness, distractibility or a short attention span may be unable to stay secured in a car seat, and could become a serious distraction to the driver. Families may have to try a variety of seats to see which one provides the most secure restraint.

Harness systems may be helpful, but must be properly secured and snug. Child safety seats with harness systems for use by children weighing more than 40 pounds may also be useful.

E-Z-ON Zipper Vest

Another option is the E-Z-ON Zipper Vest. This travel vest is perfect for a child needing extra restraint. The vest eliminates the worry of unbuckling that you have with a standard car seat. The vest you want is model #103Z and fits ages 2 to adult, from 20 to 168 pounds.

E-Z-ON products makes harnesses and vests for vehicles with lap only seat belts and for children with special needs. Two products are the 86 Y harness and the zipper vest. You must use E-Z-ON's vehicle tether mount, floor mount or wheelchair mount.

Some older children with behavioral challenges may be transported in a conventional booster seat, or by combining a booster seat and a vest. Boosters lift your child up, may be more comfortable, give a better view out of the car window, and improve your child's attitude about being restrained.

E-Z-ON will refer you to a distributor in your area.
Visit their Web site at www.ezonpro.com.

Car Safety: **If your child has cerebral palsy**

Many children with CP have poor head, neck and trunk control and benefit, as all children, when they ride rear-facing as long as possible. In a crash, when riding facing the back of the car, crash forces are spread over the back of the child's car seat and the child's back, reducing the risk of neck and spinal cord injuries.

Avoid using a makeshift restraint system. Your child may be able to use a standard child passenger restraint (page 9); however, if your child requires a medical car seat, it is a good idea to work with a rehabilitation therapist when selecting and ordering the adaptive restraint that best meets his positioning needs. Since a large medical seat is much more expensive than a standard seat, the therapist can also help you get funding from a "third-party payer" such as medical insurance, California Children's Services, or a charitable or service organization like United Cerebral Palsy or Kiwanis.

Please see "Letters of Medical Necessity" samples on pages 26-29 of this booklet.

RadianRXT

The RadianRXT could be the only seat you'll ever need. It is rear-facing from 5 to 45 pounds; forward-facing 20 to 80 pounds in the 5-point harness, has 2 recline positions in forward facing mode, an adjustable head support, a longer seat bottom for leg support and sits low on seat for easy loading. This convertible seat converts to a booster for children 80 to 120 pounds up to 57 inches tall. It has side impact EPS foam protection and SuperLATCH system for easy installation. It is rated for LATCH use up to 80 pounds.

Find a retailer at http://us.diono.com/.

Britax Marathon 70

The Britax Marathon may be another suitable option. This convertible car seat has rear- and forward-facing recline for child comfort and positioning. The Marathon fits children rear facing from 5 to 40 pounds and children forward facing up to 70 pounds. It has a Quick-Adjust Harness that repositions the harness shoulder height without disassembling the harness straps which ensures a snug and secure fit. The car seat also has side impact protection.

Britax Frontier 85

The Frontier is a forward facing car seat that may be used from 2 years, 25 pounds up to 85 pounds, 30 to 57 inches height, in the 5-point harness. It may be used with the vehicle shoulder/seat belt system as a booster seat from 40 pounds to 120 pounds, 42 to 65 inches in height.

Car Safety: **If your child has Down syndrome**

A child with Down syndrome may have low muscle tone. In some children, the first and second vertebrae in their neck move easily. A rear-facing car seat will better protect your child's head, neck and spine.

Many children with Down syndrome need heart surgery. If you are concerned about car seat harness straps placing too much pressure on their sutures, you may want to consider a different car seat. Try to continue having your child ride in the rear-facing position; strap pressure in a crash is less than what a child riding in the forward-facing position will experience.

You can add crotch rolls between the child's legs to prevent slumping. Foam rolls can provide side support. Soft padding that doesn't alter harness function can be positioned on either side of the head.

Never perform makeshift contrivances to a car seat such as placing padding behind or under the child in the seat, or securing your child's head separately to keep it from falling forward. If your child has a tracheostomy, do not use a child restraint with a tray or shield. A forward fall could cause an injury to their airway.

Combi Zeus

The Combi Zeus 360° convertible car seat may work well. There is a 3-position forward facing recline and recline adjustments can be made without removing child from restraint. There is a foam wedge to assist with infant recline. The seat is designed to rotate 360 degrees without re-installation and accommodates children 5 to 33 pounds rear-facing and 20 to 40 pounds forward-facing. It features a 5 point harness system, Tru-Safe® Side Impact Protection (EPS), built-in lock-offs, anti-rebound base. The permanent installation base does not need to be reinstalled when changing to rear or forward facing mode.

If your child has very poor neck control, and low muscle tone, medical car seats that come with wedges, positional padding, head rests, pommels, and seat depth extenders will work better.

RideSafer Vest

An upright vest may work well for a child with mild neuromuscular weakness, cerebral palsy (CP), Down syndrome, if the child does not need the additional back and neck support of a medical car seat. One travel vest option is the RideSafer vest from Safe Traffic Systems for children 3 to 8 years of age, 30 to 80 pounds (over 60 pounds requires special dual top tether).

It is available at www.allegromedical.com or find a retailer at www.ridesafer.net

Car Safety: **If your child has a spica cast**

Your child may require a spica cast to correct developmental dysplasia of the hip, hip instability due to Down syndrome, or a femur fracture from a traumatic injury.

If your child's surgery is scheduled in advance, you'll have time to arrange transportation ahead of time. Call your orthopedic surgeon or the surgeon's staff to set up safe transport home.

The surgeon is usually able to tell you the approximate size of the cast—that is, how wide it will be, and how much it will bend at the knees. Children in spica casts often fit in a conventional car seat.

One option may be a convertible seat with lower sides like the RadianRXT or wider front such as the Britax Marathon. Sometimes a small baby may fit into a car bed, depending on how their cast is made.

E-Z-ON Modified Vest

The E-Z-ON modified vest comes in two sizes for children in spica casts. The 101M2 is a better fit for children who are 5 to 12 years old, 65 to 100 pounds. The M203-XS fits more snugly on children 1 to 5 years of age, 20 to 65 pounds. When using the E-Z-ON modified vest, your child must travel lying down in the rear seat of the vehicle.

Go to www.ezonpro.com for a referral to a distributor in your area. Hospitals or other institutions may purchase the E-Z-ON modified vest from Prevention Alternatives: 517-927-7731.

Hippo

The Hippo is a car seat that was specially designed for children in spica casts by Snug Seat and Britax using the Marathon shell. It may be used rear-facing, semi-reclined, for a child who is between 5 and 33 pounds or forward-facing for a child who is over 1 year of age and between 20 and 65 pounds with a maximum height of 49 inches. The Hippo must be installed forward-facing in the upright position if the child's weight is between 34 and 65 pounds, but may be installed forward-facing in the semi reclined position for children weighing less than 33 pounds. Note that the upper weight limits listed refer to casted weight. This seat must be tethered if the child weighs 40 pounds or more. The Hippos can be tethered rear-facing.

The Hippo may be purchased by consumers at www.snugseat.com, ww.adaptivemall.com or Prevention Alternatives: 517-927-7731.

Car Safety: **If your child has a "special medical condition"**

Such as Osteogenesis Imperfecta, Myelomeningocele, Gastroschisis or Pierre Robin Sequence.

Special child passenger restraints called car beds are available for infants who must travel lying down on their stomach, back or side. These restraints are used for special medical conditions as well as for premature infants who are not able to ride at a 45 degree angle and maintain normal breathing.

The Neonatologist or Neonatal Nurse Practitioner will determine the need for a car bed prior to your infant's discharge from the Neonatal Intensive Care Unit.

If your baby is premature; has passed the Angle Tolerance Test in the NICU; and is able to ride in a car seat, instead of a car bed, but is still under 5 pounds at discharge; he or she may be able to fit a Safety 1st On Board 35, Chicco Key fit 30 or Cosco Comfy Carrie. Another option is the Combi Coccoro, a convertible car seat rated for children 3 to 33 pounds rear-facing, which may then be used forward-facing up to 40 pounds with a maximum height of 40 inches.

The Angel Ride

The Angel Ride holds infants from birth to 9 pounds and who are up to 21.5 inches in length, and who must ride flat. It has a wraparound three-point harness. You may buy the AngelRide direct at www.angel-guard.com/buy.html or from www.adaptivemall.com.

The Dream Ride SE

The Dream Ride fits infants weighing from 5 to 20 pounds, who are 19 to 26 inches in length, and must lie flat. It has a three-point harness. You may buy the Ultra Dream Ride direct from www.allegromedical.com.

The Hope

The Hope car bed designed and manufactured by Merritt is a larger, deeper medical car bed that accommodates infants from 4.5 to 35 pounds, and up to 29 inches in length (longer if legs are permitted to bend). The bed is for infants with medical conditions requiring them to lie flat (supine or prone) or on their right side. There are two restraint bags available in small and large size. The bag is attached to the bed. A small size or large cummerbund are secured over the infant in the restraint bag. A 3-point harness is an option for infants weighing over 10 pounds. The cummerbund is placed on the infant and the harness is secured over it. The bed is lined with EPS absorbing foam for head and side protection. It installs securely.

A summary of medical car seat options

Choosing the best medical car seat is a decision to be made by the child's multidisciplinary team, which commonly includes a case manager, therapist, specialist and primary healthcare provider.

The decision must factor in:
- Family/caretaker dynamics
- Vehicle in which it will be used
- How much money is available
- Availability of resources and restraints.

It's important to try different kinds of restraints. Which works best for the parent and child?

Other questions to be considered include:
- What kind of vehicle does the child's family own?
- How old is the vehicle?
- How many children must be seated?
- What are the child's special needs?

The therapist will consider these questions:
- What is the child's weight, height and age?
- What is the child's medical condition?
- What traveling position is best for the child—flat, prone, supine or on the side?
- Does the child breathe well when sitting upright?
- Can the child bend at the hips?
- Can the child sit unsupported?

Correct positioning protects the child's airway; provides posture support, whether the child has high or low muscle tone; and promotes functional positions and comfort.

Poor positioning is risky. It can lead to unsafe transport, further contractures, fractures and even breathing problems.

Develop a care plan based on the child's special needs, including what to do in a transportation emergency.

Transportation issues should be included in the Individual Family Service Plan (IFSP) you write with Regional Center staff and the Individual Education Plan (IEP) you write with your child's school.

You may need technical assistance. Large seats require one to two tethers and heavy-duty hardware. Help is available.

Ask your child's therapist to call the Riley Hospital for Children in Indianapolis for expert advice on all transportation needs. One of their programs is the National Center for the Safe Transportation of Children with Special Healthcare Needs. Call 800-755-0912, or visit www.preventinjury.org/NationalCenter.asp.

Special needs car seats are very expensive. You or your child's therapist must write a "Letter of Medical Necessity" (see letter samples in this kit) to try to get reimbursement from your medical insurance company.

Consumers may find some special safety products difficult to find through stores. Purchases may be made directly from Prevention Alternatives at 517-927-7731.

A summary of medical car seat options

There are also several medical seats that may be suitable for your child. These seats accommodate larger children and children with special medical conditions.

Various medical car seats listed here are also available direct to consumers at www.adaptivemall.com, www.columbiamedical.com, www.allegromedical.com, and www.reha-partner.com.

The car beds including the Hope, as well as the Columbia, Traveller Plus, Recaro, Roosevelt, and Churchill medical car seats are all available to hospitals and families at Prevention Alternatives: 517-927-7731.

The Roosevelt

The Roosevelt medical car seat by Merritt accommodates children from 35 to 115 pounds and 33.5 to 62 inches in height. It has an optional tether feature for easy installation. There is a head rest with a cap that attaches to it with Velcro for children with low muscle tone; a stay put pommel; leg extensions; a quick change incontinent cover, and other extras.

The Churchill

The Churchill by Merritt is a medical booster seat that accommodates children 65 to 175 pounds and from 48 to 72 inches in height. It features a vest, chest wrap, stay put pommel, and head rest as well as many other extras such as an adductor strap, and hip inflection pommel.

Special Tomato

The special Tomato Multi-Positioning System (MPS) has been designed to offer comfortable and proper positioning support in the car. Soft, lightweight and durable modular seating surface cushions allow for individualized adjustment. The Special Tomato small car seat fits children 2 to 5 years up to 50 pounds, 30 to 50 inches height; the large car seat fits children 8 to 11 years up to 150 pounds, 48 to 60 inches height; extended seat fits children in age range 11 to 14 years, maximum weight 150 pounds.

Recaro Monza Reha

The Monza is used for children between 33.1 and 110.2 pounds and between 37 to 59 inches in height. The seat has an integrated 5-point positioning harness and a turning plate for ease of placing and removing a child from the seat. The Monza also comes with removable head, lateral trunk, and side supports as well as a seat wedge and footrest.

Recaro Sport Reha

The Sport is suitable as a forward facing seat for children 20 to 80 pounds and up to 59 inches tall. The 5 point harness is used up until 40 pounds then the child is restrained in the shoulder seat belt system. The seat features head and neck support, as well as lateral trunk support, and foot rest. This seat also has a turning plate.

Snug Seat Pilot

The Pilot is a high back booster seat for children 40 to 120 pounds and from 38 to 63 inches in height who are 3 to 12 years of age. It is equipped with a positioning vest to promote torso support. The seat has 2 recline positions, a 4 inch seat extension, 2 position abductors and other important features.

Snug Seat Traveller Plus

The Snug Seat Traveller Plus fits children weighing from 22 to 105 pounds who are 30 to 56 inches tall.

Columbia 2000 Integrated Positioning System (IPS)

The Columbia 2000 fits children weighing from 20 to 102 pounds who are up to 60 inches in height.

The Columbia 2500 fits children weighing from 40 to 130 pounds and 54 to 60 inches in height.

The Columbia 2400 Spirit Adjustable Positioning System (APS)

The Columbia 2400 Spirit is designed for children weighing 25 to 130 pounds and up to 66 inches in height. The Spirit offers swing-away trunk and hip supports that are individually adjustable and can be fitted exactly to the user's specifications. Swing-away latch mechanisms enable a full 180 degree range so that they swing completely out of the way during transfers in and out of the seat.

Carrie

The Carrie seat is available in four sizes ranging from the pre-school size for children weighing 20 to 40 pounds and 30 to 38 inches height on up to the small adult size for those weighing up to 130 pounds, 58 to 68 inches height.

Peppino

Peppino which has stroller options, fits children weighing up to 55 pounds, 37 to 46 inches in height.

Car Safety: **While in the car**

If you are carrying medical equipment, such as an oxygen tank, monitor or portable suction device, secure these items to the vehicle floor or under the seat so they will not become projectiles in a motor vehicle crash. In a collision, small objects become dangerous missiles impacting with a force equal to 20 to 30 times their weight.

Using Electrical Equipment

Electrical equipment used during transport should have portable self-contained power for twice the expected time of the trip.

Checking Your Child Restraint For Proper Installation

For information on getting a car seat check-up in your area call 866-732-8243 or go to www.safekids.org.

Make sure your car seat is installed correctly and is the best car seat to fit your child's needs.

If your child cannot be properly restrained, we recommend using an ambulance instead.
A list of child passenger safety technicians who have been certified in special needs transportation at the Riley Hospital's Automotive SafetyProgram is available at www.preventinjury.org/SNTtrainedPpl.asp.

Learning More About Special Needs Transportation Issues

To learn more about special needs transportation, visit the Riley Children's Hospital's Children Automotive Safety Program at www.preventinjury.org or the American Academy of Pediatrics at www.aap.org.

Helpful Tip: **Preparing for emergencies and disasters**

Preparing for an emergency or disaster can be an overwhelming and difficult task. Preparing in advance can help you be ready. We recommend stockpiling a two-week supply of food and water, as well as first aid supplies, clothing and bedding, tools and other emergency supplies.

Think of what other necessities are essential to your family. Do you have an adequate supply of medication and a safe place to store it? How will you keep medical supplies sanitary and maintain electrical backup for your medical equipment?

A disaster plan should include information such as:

- Where to go should a disaster occur
- The best evacuation route out of your neighborhood and to local shelters
- The name and phone number of an out-of-state contact person
- What to do with family pets.

Find out if your child's school and your workplace have disaster plans. Make sure important information about your child's special needs is included in the school's plan. Medical information forms are available online at http://www.aap.org/advocacy/blankform.pdf

or www.childrenshospitaloakland.org/healthcare/depts/InjuryPreventionHome.asp. The form can be customized to include every family member.

What do emergency response staffers or other people need to know about your child's special needs?

Note any special communication needs, medications and how to make your child comfortable if ambulatory devices need to be left behind. Consider purchasing a Medic Alert bracelet (www.medicalert.org) or a similar product so that medical information is kept close to your child's body at all times.

Source: The Family Resource Network (modified)

INSIDE TIP

The American Red Cross is a good source for information. Visit their Web site at www.redcross.org.

Other Web sites give tips on what to consider when creating a disaster plan and emergency preparedness kit for your family.

Find more at:

- Prepare Now at www.preparenow.org
- Family Readiness Kit at www.aap.org/family/frk/aapfrkfull.pdf.

How to Obtain a Letter of Medical Necessity

First, get a prescription from your child's specialist (the one who treats him for his special needs) for a Rehabilitation OT (Occupational Therapist) or PT (Physical Therapist) to evaluate your child for an adaptive child restraint and to provide it.

Second, the therapist will evaluate your child and may write the letter of medical necessity, or you may need to write it yourself.

Third, you and the therapist will choose a vendor (company) to buy the vest or car seat from.

Usually the therapist will send the letter of medical necessity to Medicaid or private insurance provider for the child restraint, and order it on your behalf. The DME code for reimbursement is E1399.

Public schools can bill Medicaid for equipment and services if your child is eligible for Medicaid. These health-related services are available:

- Occupational therapy
- Physical therapy
- Speech therapy
- Hearing services
- Personal care assistant services
- Mental health services
- Nursing services
- Special transportation
- Assistive technology devices
- Oral language interpreter services.

Sometimes it is possible to obtain special needs restraints as part of the child's Individual Educational Plan (IEP). Children receiving special education services are also eligible to receive transportation and related services needed to carry out the educational plan. Charitable agencies like United Cerebral Palsy and service organizations like the Kiwanis may also sometimes help pay for a specialized child restraint, especially if medical insurance or Medi-Cal says no.

See "Letters of Medical Necessity" samples on pages 26-29.

LETTERS OF
MEDICAL NECESSITY

Sample 1: This sample can help you get reimbursement from your insurance provider; modify it as needed.

Date:
Re: car safety restraint
DOB:
Insurance:

To Whom It May Concern:

_____is a five-year-old with a diagnosis of global developmental delay and seizure disorder. This patient is unable to sit in a standard booster seat because of behavioral issues. He is over the weight limit for a child restraint with a harness, and will not stay in position in a regular booster seat. This presents a danger to him and the other occupants of the vehicle. He is therefore in need of an EZ-ON vest car safety restraint device to provide him with a harness at the shoulders and trunk. This restraint is also tethered to the back of the car for additional safety. It is equipped with a back closure so that the patient will not be able to remove it. The parents have tried this restraint on a loaner basis and have had success with this positioning. They have a tether anchor mounted in the car to support this restraint.

The child's need for safety has not previously been met and the child cannot be properly secured in the car without the prescribed car safety restraint. Both California law and best practice dictate that children under 6 or under 60 pounds be secured in an approved child restraint. The patient's behavior makes it unsafe for him to use a standard vehicle restraint. The EZ-ON vest in size-adjustable, small, with a zipper closure, is medically necessary for this patient's care.

Sincerely,

_____OTR/L
_____MD

LETTERS OF
MEDICAL NECESSITY

Sample 2: This sample can help you get reimbursement from your insurance provider; modify it as needed.

Date:
Re: car safety restraint
DOB:
Insurance:

To Whom it May Concern:

_____is a 6-year-old with a diagnosis of fragile X syndrome. This patient is unable to sit in a standard booster seat because of behavioral issues. He is over the weight limit for a child restraint with a harness, but will not stay in position in a regular booster seat. This presents a danger to him and the other occupants of the vehicle. He is therefore in need of an EZ-ON Vest car safety restraint device and Ride Ryte booster seat to provide him with a combination harness system and booster seat. The vest provides restraint at the shoulders and trunk and is tethered to the back of the car for additional safety. It is equipped with a back closure so that _____will not be able to remove it. The booster provides improved positioning of the vehicle seat belt low on the pelvis, avoiding dangerous positioning on the abdomen. The parents have tried this restraint on a loaner basis and have had success with this positioning. They have had a tether anchor mounted in the car to support this restraint.

The child's need for safety has not previously been met and the child cannot be properly secured in the car without the prescribed car safety restraints. The patient's behavior makes it unsafe for him to use a standard vehicle seat belt system. Therefore, the EZ-ON Vest (Model 103Z) in size adjustable, XXS, with a back zipper closure, and the Ride^Ryte booster seat (full back) are medically necessary for this patient's care.

Sincerely,

_____OTR/L
_____MD

LETTERS OF
MEDICAL NECESSITY

Sample 3: This sample can help you get reimbursement from your insurance provider; modify it as needed.

Date:
Re: car safety restraint
DOB:
Insurance:

To Whom it May Concern:

_____is almost 10 and has a diagnosis of spastic quadriplegic cerebral palsy. The patient is unable to sit in a standard child safety restraint (booster seat) because of her decreased head and trunk control, and decreased postural support. _____ also demonstrates excessive extensor thrust, making it difficult to position her in a car seat. She has been traveling in a standard forward-facing child restraint despite being over the weight limit for harness use (40 pound limit — she is 45 pounds), or using a tumbleforms positioning seat, which is not a car seat and cannot be installed in the vehicle.

_____is therefore in need of a Snug seat Traveller Plus car seat to provide her with additional support. This specialty restraint is made specifically for children who need harness restraint beyond the standard 40 pounds weight limit, providing a five-point harness for children up to 105 pounds. The restraint is also tethered to the back seat of the car for additional safety. Instruction was given to the parents on installation and positioning. The family has tried this restraint on a loaner basis and has had success with this positioning.

The child's need for safety has not previously been met and the child cannot be properly secured in the car without the prescribed car safety restraint. The patient's extremely poor head and trunk control make it unsafe for her to use a standard vehicle restraint or a standard booster seat. Therefore, the Snug Seat Traveller Plus car seat with a seat depth extender (for growth) is medically necessary for this patient's care.

Sincerely,

_____OTR/L
_____MD

LETTERS OF
MEDICAL NECESSITY

Sample 4: This sample can help you get reimbursement from your insurance provider; modify it as needed.

Date:
Re: car safety restraint
DOB:
Insurance:

To Whom It May Concern:

_____is a 5-year-old with a diagnosis of cerebral palsy and hydrocephalus, who presents with poor head and neck control due to hypotonic neck/trunk musculature. As a result of this decreased muscle control, this patient is unable to sit in a standard child safety restraint. Standard seats require upright positioning, which she cannot tolerate secondary to poor head control. She is currently traveling in a standard forward-facing child restraint with broken parts that is not providing her with the support she needs.

_____is therefore in need of a Britax Boulevard car seat to provide her with additional support and adequate occupant protection. This restraint is for children who need a harness beyond the standard 40-pound weight limit, providing a five-point harness up to 65 pounds. As she now weighs 34 pounds, this will allow for future growth. Additional features which are beneficial for _____'s positioning needs include side impact protection wings, which will serve as lateral head supports, and a recline in the forward-facing position, which assists with her head and trunk positioning. This seat does not require special installation and will allow the child's mother to use friends' and family vehicles for transport, necessary in her case.

The child's need for safety has not been previously met and the child cannot be properly secured in the car without the prescribed car safety restraint. The patient's decreased head and neck control make it unsafe for her to use a standard child restraint, and she will continue to require a harnessed car seat long beyond the traditional 40-pound weight limit allowed by standard seats. Therefore, the Britax Boulevard car seat is medically necessary for this patient's care.

Sincerely,

_____OTR/L
_____MD

Resources

American Academy of Pediatrics
www.aap.org

Beach Center on Disability:
www.beachcenter.org

Children's Regional Integrated Service System:
www.criss-ca.org

Family Village:
www.familyvillage.wisc.edu

Family Voices:
www.familyvoices.org

Improving Chronic Illness Care:
www.improvingchroniccare.org

Institute for Child Health Policy:
www.ichp.ufl.edu/ichp

Medical Home:
www.medicalhomeinfo.org

Car seats - harnesses - beds:
www.adaptivemall.com
www.allegromedical.com
www.angel-guard.com/buy.html
www.columbiamedical.com
www.ezonpro.com
www.safetyangel.com
www.mercurydistributing.com
www.reha-partner.com
www.snugseat.com

Prevention Alternatives:
517-927-7731

National Center for the Safe Transportation of Children with Special Healthcare Needs:
800-755-0912
www.preventinjury.org/specneeds.asp

Find a car seat check-up in your area:
866-732-8243
www.nhtsa.dot.gov
www.safekids.org
www. aaa.com, click on "auto", "Car & Traffic Safety", "Keeping Your Kids Safe" ("Learn more"), and "Child Car Seat Inspections" or 800-637-2122