Medical Finance Resources

TENS Unit Medical Necessity

Patient Name _____ Date _____

The above named patient has had chronic musculoskeletal or neuropathic pain for greater than 3 months and has been unresponsive to conservative and medical therapy. The pain does cause significant disruption of function. The patient has benefited from the trial of a TENS unit and it is medically necessary to continue with long term use.

Conservative treatment tried and impact of relief (including medication)

Perceived intensity of pain with and without TENS (% improvement)

Any other modalities (if any) in use of pain control

Did patient complete one month trial of TENS unit

Doctor Signature _____ date _____