

## PALMETTO GBA GUIDELINE CHECKLIST

In order to treat a patient within the Medicare areas administered by Palmetto the patient must have a documented six to eight week trial of conservative therapy which includes:

- \_\_\_ 1. Daily exercise plan
- \_\_\_ 2. Periodic leg elevation
- \_\_\_ 3. Weight loss
- \_\_\_ 4. Use of graduated compression stockings

Conservative therapy may be waived if the patient has advanced skin changes, and/or ulceration or bleeding. The medical record must include detailed documentation as to the nature and extent of the complications. Otherwise, the conservative therapy failure will need to be documented.

The patient must be symptomatic and have one or more of the following:

- \_\_\_ 1. Stasis ulcer of the lower leg
- \_\_\_ 2. Significant pain and/or significant edema that interferes with activities of daily living
- \_\_\_ 3. Bleeding associated with the diseased vessels of the lower extremities
- \_\_\_ 4. Recurrent episodes of superficial phlebitis
- \_\_\_ 5. Stasis dermatitis
- \_\_\_ 6. Refractory dependent edema

If conservative therapy measures have failed, AND they have one of the criteria immediately above, an ERFA or laser ablation may be performed if All of the following are met:

- \_\_\_ 1. Maximum vein diameter of 20mm for laser ablation
- \_\_\_ 2. Absence of thrombosis or vein tortuosity impairing catheter advancement
- \_\_\_ 3. Patient's anatomy amenable to laser or RF catheter
- \_\_\_ 4. Absence of significant peripheral arterial disease
- \_\_\_ 5. Non-aneurismal saphenous veins



## PALMETTO GUIDELINE CHECKLIST (cont.)

The History and Physical in addition to your normal documentation should contain:

- \_\_\_ 1. The order for the Diagnostic Ultrasound
- \_\_\_ 2. Absence of PAD
- \_\_\_ 3. A patient statement or two on HOW their activities of daily living are impacted by their venous disease
- \_\_\_ 4. The order for conservative therapy

The Diagnostic Ultrasound should be performed by an accredited vascular technician and, in addition to your normal documentation, should contain:

- \_\_\_ 1. Absence of DVT
- \_\_\_ 2. Presence and patency of deep vein system
- \_\_\_ 3. Documented vein size and reflux
- \_\_\_ 4. Tortuosity of the GSV and SSV
- \_\_\_ 5. Note superficial venous segments and perforators
- \_\_\_ 6. Symptomatic veins must be in distribution of the refluxing saphenous

