

Date: MM/DD/YEAR

Name: John EXAMPLE

Title: MCCA Adjuster

Company: Citizens Insurance

Address: PO Box 0000

San Diego, CA

Dear Mr. EXAMPLE,

I am writing this letter upon your request regarding Mr. XXXXXX. My name is XXXXXX. I am one of the physical therapist that saw Mr. XXXXXX for rehabilitation after his (reason for therapy). I was consulted in regard to (specific diagnosis) that he developed after the (reason for therapy). In my evaluation, I discovered that the primary reason for the (specific diagnosis) is that he was still having (deficit in gait/balance/posture) and was (effects of these deficits). (Further explanation of deficits and its relation to the diagnosis and reason for therapy).

Because the (deficit in gait/balance/posture) was the root cause of the (specific diagnosis), we used an apparatus called the NewGait that was very effective in helping to improve (deficit in gait/balance/posture [proprioception while facilitating a stable and symmetrical gait pattern]). The NewGait is a harness system composed of shoulder straps, a waist belt, and limb straps, all interlinked by strategically placed elastic bands. As these bands traverse joints, they improve stability and increase the proprioceptive feedback to the brain about the body position. In addition, the elasticity in the bands helps promote recruitment of key muscles during the gait cycle if customized and donned correctly.

The most effective configuration of the NewGait for Mr. XXXXXX was determined, and he loved it! It was good to see him [EXAMPLE - smile again and walk down the hall with confidence]. I am writing to request that this apparatus be purchased for him to use at home daily. I am confident that his walking and balance will get better without any more PT intervention if he can walk and exercise with this harness at home. The components that Mr. XXXXXX would require are listed below:

- EXAMPLE
- EXAMPLE
- EXAMPLE
- EXAMPLE

The total cost of this device would be \$XXXX. I have attached an itemized list of the pieces. This apparatus is usually purchased online, but I have contacted the developers on the patient's behalf, and they can invoice you the cost to pay by card or check if that would be the best way to obtain it. I would be happy to interface between the patient and the company to be sure that Mr. XXXXXX is donning and wearing it correctly.

Thank you very much, Mr. EXAMPLE for your time and for considering Mr. XXXXXX's health needs. I hope that this letter has sufficient information your company needs to make an informed decision to provide this device for him. I would encourage you to look at the NewGait website www.TheNewGait.com where you can find amazing stories and testimonies of recovery. Finally, for good faith, I do not have any financial owning or interest in this company. I just want to help put the "care" back in healthcare and make a difference!

Respectfully submitted,

Name:

Company:

Contact: (XXX) XXX-XXXX | XXXX@EXAMPLE.com