## Letter of Med Nec for Suction Machine

| Date:  |
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| RE:<br>DOB:  |
| o whom it may concern;   |
| (patient) is a (age) (sex) that has a diagnosis of but not limited to (diagnosis). Due to his/her complex medical condition, (patient) has difficulty handling his/her secretions. patient) often chokes and gags on his secretions which could lead to aspiration and/or espiratory distress. Therefore I am requesting a suction machine and supplies to assist with clearing his/her secretion, to keep (patient) airway clear and healthy. |
| Sincerely,   |