

Catheter Documentation Requirements

- 1) RX must contain:
 - * Catheters Straight or Coude tip with FR size
 - * DX = 788.20 Retention Urine or 788.30 Urinary Incontinence
NOTE: UTI alone is NOT applicable
 - * Times per day catheterization is required/needed
 - * Length of need (if not 3 months or greater not covered by insurance)
 - * Doctor Signature and date ---NO STAMPS

- 2) Progress Note must contain some form of ALL of these statements:
 - * State he/she has Incontinence or retention
 - * Why he / she has Incontinence or Retention, ie: Neurogenic bladder
 - * The Condition (retention or incontinence) is of long and indefinite duration = at least 3 months or more (judgment of the physician)
 - * Number of times per day to catheter?
 - * Doctor Signature and Date – NO STAMPS

COUDE TIP: There must be documentation in the beneficiary's medical record of the medical necessity for that catheter. An example would be the inability to catheterize with a straight tip catheter.