

EXAMPLE

Letter of Medical Necessity for Bariatric Surgery

January 1, 2010

RE: Jane Johnson
DOB: 1/1/1970

To Whom It May Concern:

I have been Ms. Johnson's primary care physician for _____ years. I am referring her now for bariatric surgery as all non-surgical options have been unsuccessful.

Ms. Johnson has been obese for _____ years and morbidly obese for the past _____ years. She is _____ tall, weighs _____ pounds and has a BMI of _____. She has tried multiple weight management programs including **[list all programs the patient has participated in and if any were tried more than once]**; however, she has not lost enough weight to resolve her morbid obesity. Additionally, she cannot sustain the weight loss that occurred on diet regimens, and has gained the weight back and even more. She has tried multiple times to change her diet and to increase exercise but without success. Her weight has gone up and down all of her life, and she is now at her highest weight.

Ms. Johnson suffers from **[list all co-morbidities]**, which is most likely due to her morbid obesity. Per National Institutes of Health criteria, she qualifies as a bariatric surgery candidate. Extensive scientific literature has shown the morbidity and mortality accompanying obesity increases with a BMI over 35. Clearly Ms. Johnson, with her BMI of _____, will benefit from successful and sustained weight loss.

I believe that surgery is the best option for Ms. Johnson, in order to lose her excess weight, and also to be able to maintain that weight loss. I have supervised her in the office for _____ years and kept detailed documentation of her weights (**attach past 5 year's weight history with letter, if available**) and I have counseled her extensively on maintaining a healthy diet and increasing her exercise (**include details of any physician-supervised weight management programs**). None of these efforts have been successful and I now feel the bariatric surgery is in her best interest.

Sincerely,
John Smith, MD