AmericanHomeCare Equipment

Corporate Address: 3200 N 29 Ave. Hollywood, FL 33020
West Palm Beach Address: 6252 S Congress Ave, Suite: J2, Lantana Fl 33462
Phone: (954)-112-5052 | Fax: (954) 112-5288
Email: customerservice@ahcequip.com

Dispensing Order for Compression Garments

Patient Name:		**Physician Name:**	
DOB:		**NPI #:**	
Patient Address:		**Physician Phone:**	
Medicare ID #:		**Physician Fax:**	
Order Date:		**Physician Address:**	

Daytime Compression Garments

Item(s) Ordered:

Quantity	HCPCS Code	Item Description

Nighttime Compression Garments

Item(s) Ordered:

Quantity	HCPCS Code	Item Description

Order Details

Extremity: ☐ Bilateral ☐ Left Extremity ☐ Right Extremity

Length of Need: ☐ Lifetime ☐ Other: _____

Diagnosis Code (ICD-10): ☐ Lymphedema - I89.0 ☐ Other: _____

Physician Signature

Physician Signature	**Date**