Dr. [Name],

As you are aware, the COVID-19 pandemic and response efforts have altered healthcare practices globally and across the nation and have forced healthcare systems to evolve quickly to provide care to those who need it most. Physicians specializing in Nuclear Cardiology are no different and have adapted quickly to make changes in protocols and workflow to protect patients, staff, and themselves from exposure to COVID-19.

With that in mind, leaders in the American Society of Nuclear Cardiology have published a statement titled “Guidance and Best Practices for Nuclear Cardiology Laboratories during the Coronavirus 2019 (COVID-19) Pandemic: An Information Statement from ASNC and SNMMI.” The statement makes a number of recommendations regarding hygiene practices, methods that conserve personal protective equipment, and suggests a classification system for which patients should have their procedures postponed to aid labs in developing their response to COVID-19. Of note, PET is recommended where available given the rapid throughput and the more limited time the patient must spend in the lab. In addition, exercise stress testing, with or without vasodilator stress, is not recommended. A discussion with the referring physician may be required to change the order. Finally, pharmacological stress with vasodilators is preferred as it minimizes droplet exposure to staff and enables further distance between patient and staff.

Pursuant to the recommendations from the American Society of Nuclear Cardiology, I ask that you reevaluate the denial of [procedure name and CPT code] made on [date]. [One sentence describing how the procedure complies with the ASNC guideline.] Thank you for your consideration and please contact [name and contact information] with additional questions.

Sincerely,

[Physician Name]