FAXSHEET

Date: Feb-14-2020 03:49:37

To: Orange Regional Medical Center General Inbox

Subject: Diagnostic Imaging

Fax Number: 845-333-9009

To Company: Orange Regional Medical Center General Inbox

From Name: AGOCHIYA, JYOTIKA

From Company: Westchester Medical Center Advanced Physician

Services PC

From Facility: Westchester Medical Center Advanced Physician

Services PC

Support Contact: 845-354-1113

Number of

Page(s):

This facsimile transmission contains confidential information intended for the parties identified above. If you have received this transmission in error, please immediately notify me by telephone and return the original message to me at the address listed above. Distribution, reproduction or any other use of this transmission by any party other than the intended recipient is strictly prohibited.

Advanced OBGYN Associates - Pomona

974 ROUTE 45, STE 1000
POMONA, NY, 10970-3568
845-354-1113
845-354-1813

Req/Ctrl# (CD-): 6102181 Jyotika Agochiya, MD NPI: 1043659519

Provider Code: 1043659519 OB - Gynecology

Today: 02/14/2020 03:48 PM Order Date: 02/14/2020 03:15 PM

Primary Insurance Name: MMP ESSENTIALS PLAN

Insurance Address: PO BOX 2207, SCHENECTADY, NY, 12301-2207

Subscriber Number: 82127507900 **Insured Name**: Dubois, Barbara

Address: 180 Welz Rd 5, Middletown, NY, US 10941

Priority	Diagnostic Name	Fast	Assessment(s)	Instructions
Routine	Ultrasound : Pelvic, Transvaginal (include TA if necessary) 76856	No	- N83.292, Complex cyst of left ovary	

Bectronically Signed By: Jyotika Agochiya, MD

Signature of Patient/Guardian