

## Fax Transmission

**To:** chris look  
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**RE:**  
**Pages:** 2

**From:** Christopher Look  
**Fax:** 13154428694  
**Date:** Sunday, January 18, 2026 4:04 PM, PST

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**Comments:**

ROBERTO F. MANCUSO, MD, 16 PARK PLACE, NEW YORK, NY 10007-2504  
OLAGBEGI, Adedoyin (id #367915, dob: 10/30/1999)

## Referral Order

12/11/2025

To Provider	From Provider
Phone: Fax:	ROBERTO F. MANCUSO, MD TRIBECA OFFICE 16 PARK PLACE NEW YORK, NY 10007-2504 Phone: (212) 457-0878 Fax: (212) 457-0878

**Referral Order Information**

Diagnosis	• Acute back pain with sciatica ICD-10: M54.40: Lumbago with sciatica, unspecified side
Order Name	Orders included: 1 Acute back pain with sciatica ICD-10: M54.40: Lumbago with sciatica, unspecified side
Notes	• PHYSICAL THERAPIST REFERRAL Schedule Within: provider's discretion

**Patient Information**

Patient Name	OLAGBEGI, ADEDOYIN
Sex - DOB - Age	F 10/30/1999 26yo
Address	87 HERKIMER ST/APT 6 BROOKLYN, NY 11216
Phone	H: (443) 818-8492 M: (443) 818-8492
Primary Insurance	Aetna (EPO) ID: W286718514 Group: 018969601100038 Policy Holder: OLAGBEGI, ADEDOYIN
Secondary Insurance	None recorded.

Electronically Signed by: ROBERTO F. MANCUSO, MD

