

## Fax Transmission

**To:** chris look

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**RE:**

**Pages:** 2

**From:** Christopher Look

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**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:	ROBERTO F. MANCUSO, MD
Fax:	TRIBECA OFFICE
	16 PARK PLACE
	NEW YORK, NY 10007-2504
	Phone: (212) 457-0878
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Diagnosis	Referral Order Information
Order Name	<ul style="list-style-type: none"> <li>Acute back pain with sciatica</li> <li>ICD-10: M54.40; Lumbago with sciatica, unspecified side</li> </ul>
Notes	Orders included: 1 Acute back pain with sciatica ICD-10: M54.40; Lumbago with sciatica, unspecified side <ul style="list-style-type: none"> <li>PHYSICAL THERAPIST REFERRAL</li> </ul> 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: 016969601100038 Policy Holder: OLAGBEGI, ADEDOYIN
Secondary Insurance	None recorded.

Electronically Signed by: ROBERTO F. MANCUSO, MD

