

FAX COVER SHEET

TO

NAME: Carolina Shell
COMPANY:

FAX PHONE: (973)-940-1852

FROM

NAME: Denise Munoz
COMPANY: INFINITY ORTHOPEDICS, LLC
1450 RT 22 West, Ste 200
Mountainside, NJ 07092-2619

VOICE PHONE: (908)-364-7801

FAX PHONE: (908)-222-2757

SENT ON: 03/11/24 4:27 pm

PAGES: 6

SUBJECT:
Document Distribution

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INFINITY ORTHOPEDICS, LLC

JEFFREY M. WARSHAUER, D.O.
HEATHER A. PEDERSEN, PA-CP: 908-364-7801
F: 908-222-2757

WWW.INFINITYORTHOPEDICS.NJ.COM

1450 ROUTE 22 WEST
SUITE 200
MOUNTAINSIDE, NJ 070923 PROGRESS ST
SUITE 106
EDISON, NJ 08820MAILING ADDRESS:
PO BOX 4290
WARREN, NJ 07059WORKERS COMPENSATION PROGRESS NOTE
(Full Note to Follow Via Fax)

Date: 03/11/2024

Patient's Name: Diana Saenz Torres

DOB: 01/03/1963

Employer: PLAINFIELD BD OF EDUCATION

Date of Injury: 01/26/24 Worker's Compensation Company: D & H Risk MGMNT (WC)

Adjuster: CAROLINA SHELL

Phone Number: 973-940-1851X239 Fax Number: 973-940-1852

Claim Number: PLB086732
RIGHT SHOULDER

Authorized Injuries/Body Parts: LEFT ANKLE, LEFT KNEE, LEFT HAND, RIGHT ELBOW,

Diagnoses:

Multiple injuries

Treatment:

Medications:

Therapy:

Finish 3 visits - 6 additional for @ shoulder / @ elbow / @ knee / @ ankle

Diagnostic Studies:

Xray @ ankle done today / MRI @ shoulder MRI @ elbow MRI @ knee

In Office Procedures:

Other:

Surgery:

Work Status:

Full Duty

Light Duty

Sedentary Duty

Out of Work

☐☐☒☐

Work Restrictions:

No Lifting over lbs

Other:

desk duty

Return to work date:

Is the patient at MMI? ☐ Yes☒ No

Next Appointment: 4/1/24 @ 4:30pm

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PATIENT
Saenz Torres, Diana H-Phone: (908)-230-0326 DOB : 01/03/1963
815 BERCKMAN ST W-Phone: () - -
PLAINFIELD, NJ 07062 C-Phone: () - - Sex : F
Race : White Chart:
Account: 14621

PRIMARY INSURANCE
Co#: 70 Policy#: PLB086732 Insured Name: DIANA SAENZ TORRES
D & H RISK MGMT (WC) DOB : 01/03/1963
PO BOX 68 Group Number:
NEWTON, NJ 07860 Plan Name :
Onset Date : 01/26/24

FACILITY INFORMATION
Name : PATIENTS CHOICE
Phone:
Fax :

DIAGNOSTIC IMAGING ORDER
Status: Ordered Ordered : 03/11/24 4:16 pm
Doctor: Warshauer, Jeffrey M., D.O. Sched : 00/00/00
1450 RT 22 WEST, STE 200 Acquired: 00/00/00
MOUNTAINSIDE, NJ 07092-2619 Req# : 7498
Phone : (908)-364-7801
UPIN : NPI: 1558360222 Fax : (908)-222-2757
Id : 47-2470918

| Test Name: | Priority | Acc# |
|---|----------|-----------|
| MRI Elbow W/O Contrast Right | Routine | 7498-8601 |
| Dx: S50.01xD Contusion of right elbow, subsequent encounter | | |
| MRI Shoulder W/O Contrast Right | Routine | 7498-8600 |
| Dx: S43.401D Unspecified sprain of right shoulder joint, subsequent encounter | | |
| MRI Knee W/O Contrast Left | Routine | 7498-8602 |
| Dx: S80.02xD Contusion of left knee, subsequent encounter | | |

PRACTICE MESSAGE
Please give disc to patient to hand deliver to surgeon.

Ordering Provider's Signature: 
Electronically signed by agent of provider: Heather A. Pedersen, PA-C on 03/11/24 at 4:16 pm

Patient Therapy Order Requisition

Page 1

PATIENT
Saenz Torres, Diana
815 Berckman St.
Plainfield, NJ 07062
H-Phone: (908)-230-0326
W-Phone: ()- -
C-Phone: ()- -
Race: White
Account: 14621
DOB: 01/03/1963
Sex: F
Chart:

PRIMARY INSURANCE
Co#: 70 Policy#: PLB086732
D & H Risk MGMT: (WC)
PO Box 68
Newton, NJ 07860
Insured Name: Diana Saenz Torres
Group Number:
Plan Name:
Expired Date: 00/00/00

THERAPY ORDER
Status: Open
Doctor: Pedersen, Heather, PA-C
Address: 1450 ROUTE 22 WEST
Address2: SUITE 200
Address3: MOUNTAINSIDE, NJ 07092
Phone: (908)-364-7801
Therapist:
Address1:
Address2:
Phone: Fax:
NPI: 1619289824
LIC: 25MP00240600
Ordered Date: 03/11/24
Start Date: 00/00/00
End Date: 00/00/00
Duration: 2 Weeks
Fax: (908)-222-2757

Therapy Frequency
Physical Therapy 3 times week

Diagnosis: S82.65xD Nondisp fx of lateral malleolus of l fibula, 7thD
Diagnosis: S80.02xD Contusion of left knee, subsequent encounter

INSTRUCTIONS

☒ EVALUATE & TREAT
☒ T.E.N.S.
☒ MASSAGE
☐ ULTRASOUND
☐ WHIRLPOOL
☒ THERAPEUTIC EXERCISES
☒ STRENGTHENING PROGRAM
☒ GAIT TRAINING
☒ ELECTRICAL STIM
☐ JOBST

Ordering Physician's Signature: 

Electronically signed by Pedersen, Heather, PA-C on 03/11/24 at 4:15 pm

Patient Therapy Order Requisition

Page 1

PATIENT

Saenz Torres, Diana
815 Berckman St
Plainfield, NJ 07062

H-Phone: (908)-230-0326
W-Phone: ()-
C-Phone: ()-
Race: White
Account: 14621

DOB: 01/03/1963
Sex: F
Chart:

PRIMARY INSURANCE

Co#: 70 Policy#: PLB086732
D & H Risk MGMT (WC)
PO Box 68
Newton, NJ 07860

Insured Name: Diana Saenz Torres
Group Number:
Plan Name:
Expired Date: 00/00/00

THERAPY ORDER

Status: Open
Doctor: Pedersen, Heather, PA-C
Address: 1450 ROUTE 22 WEST
Address2: SUITE 200
Address3: MOUNTAINSIDE, NJ 07092
Phone: (908)-364-7801
Therapist:
Address1:
Address2:
Phone: Fax:

NPI: 1619289824
LIC: 25MP00240600
Ordered Date: 03/11/24
Start Date: 00/00/00
End Date: 00/00/00
Duration: 2 Weeks
Fax: (908)-222-2757

Therapy Frequency
Physical Therapy 3 times week

Diagnosis: S43.401D Unspecified sprain of right shoulder joint, subs encntr
Diagnosis: S50.01xD Contusion of right elbow, subsequent encounter

INSTRUCTIONS

☒ EVALUATE & TREAT
☒ T.E.N.S.
☒ MASSAGE
☐ ULTRASOUND
☐ WHIRLPOOL

☒ THERAPEUTIC EXERCISES
☒ STRENGTHENING PROGRAM
☐ GAIT TRAINING
☒ ELECTRICAL STIM
☐ JOBST

Ordering Physician's Signature: 

Electronically signed by Pedersen, Heather, PA-C on 03/11/24 at 4:15 pm

INFINITY ORTHOPEDICS, LLC

JEFFREY M. WARSHAUER, D.O.
HEATHER A. PEDERSEN, PA-CP: 908-364-7801
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EDISON, NJ 08820MAILING ADDRESS:
PO BOX 4290
WARREN, NJ 07059

To Whom it May Concern:

Diana Saenz Torres is currently under my care and was seen in our office today, 03/11/2024.

- ☐ Please excuse the patient from work today.
- ☐ The patient may return to work at full duty status on 00/00/0000.
- ☒ The patient may return to work on 03/11/2024.

With the following restrictions:

- ☒ Sedentary duty
- ☐ Light duty
- ☐ No lifting over lbs.
- ☐ Out of Work
- ☐ Surgery Scheduled for:
- ☐ Remain out of work for:
- ☒ Other: DESK DUTY

- ☒ The patient will be re-evaluated on 04/01/2024.

Should you have any questions regarding the patient's treatment please call us at (908)364-7801.

Dr. Jeffery M. Warshauer/ Heather A. Pedersen, PA-C