MRI Prescription

Date: <u>02/17/2023</u>		F		
Patient: William H. Poole DOB: 10/8/1968				
Type of MRI: Right upper arm without contrast				
Diagnosis: Spontaneous rupture of other tendons, right upper arm (M66.821)				
Attention to: Confirm right bi				
Provider Name: Krystal Casayu	ran-Wright, APN-C			
Provider Signature:	X	2/17/2023 10:05:06 AK		
		ssessment		
Height: 5'9"	We	eight; 215 lbs		
		Yes No		
History of previous MRI If yes, when and where:	's :			
2. History of Claustrophobi If yes, assess need for se				
3. Does the client have any Pregnancy – LN Body Piercing:	ЛР:	nies all		
Previous Surger	ies:	Washing with Matal		
Tattoos Shrapnel or Me	ta1	Working with Metal Heart Valves		
Dental Work		Pacemaker		
Brain Aneurysn	ı Clips	Cochlear Implant		
Diabetic		Insulin Pump		
Comments:				
Scheduled MRI Appointment	Date and Time:			
 Clients with sedation pre- procedure for taking the Closed, Semi-opened and 	scription should contact medication d open MRI's are availal	the facility prior to the ap ble if upon clients need.		nine their
Eatontown 2-12 Corbett Way Ste 101 Eatontown, 07 Tel: 732-263-7950 Fax: 732-263-7946 Neptune 2441A High Ste A Neptune. N Tel: 732-77 Fax: 732-263-7946 Fax: 732-77	Lakewood 150 Airport Roa Ste 100 NJ 07753 Lakewood, NJ 0 6-4251 Tel: 732-942-955	Holmdel 100 Commons Way Ste 160 8701 Holmdel, NJ 07733 Tel: 732-450-2930	Manalapan 195 Route 9 S Ste 213 Manalapan, NJ 0772 Tel: 732-450-2745 Fax: 732-450-2746	Toms River 1430 Hooper Avenue Ste 200-B 16 Toms River, NJ 08753 Tel: 732-557-0700 Fax: 732-557-9159