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## David Epstein M.D.

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## CONSULTS & STUDIES PRESCRIPTION:

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Patient Name: James Share	w Date: 6-1-2023
<b>Diagnosis</b> : ⊠ Right □ I S46.011AStra	Left
Consults: Please evalua ☐ Internal Medicin ☐ PM & R	ate patient regarding above: e
Studies:	
☐ X-Ray: ☐	Right ☐ Left ☐ Bilateral ☐ Weight Bearing
⊠MRI: ⊠	Right   Left   Bilateral   Right shoulder MRI
☐ CT Scan:	Right 🗆 Left 🗀 Bilateral
☐ Ultrasound/Doppler: ☐	Right ☐ Left ☐ Bilateral ☐ Venous ☐ Arterial ☐ Upper Extremity ☐ Lower Extremity
□ EMG/NCV: □	Right ☐ Left ☐ Bilateral ☐ Upper Extremity ☐ Lower Extremity
☐ Bone Scan: ☐	Right ☐ Left ☐ Bilateral ☐ Three-Phase ☐ Indium WBC
Laboratory Testing: Chemistry/Hematology/Micr SMA-7 ☐ ESR SMA-20 ☐ CRP CBC ☐ UA W/ Diff Micro ☐ RPR PT/PTT/INR ☐ Uric Ac TzanckSmear	☐ RF ☐ T3/FT4/TSH ☐ C&S ☐ Gram Stain ☐ ANA ☐ B12/Folate ☐ Aerobic ☐ Fungus KOH Stain ☐ Lyme Titers ☐ Joint Fluid ☐ Anaerobic ☐ Cell Count ☐ Mycobacterium
Physician's Signature:	

(I have medically prescribed the above treatment)

**David M. Epstein, MD**Sports Medicine & Orthopedic Surgery,
Shoulder, Knee, Foot & Ankle Surgery

**Zachary Murray, PA-C**Orthopedic Physician Assistant