

10/10/24

INFINITY ORTHOPEDICS, LLC
Patient Diagnostic Imaging Order Requisition


Page 1

Graham, Ricky
1163 E HENRY ST APT 1
NJ 07036PATIENT
H-Phone: (908)-720-1921 DOB : 01/22/1951
W-Phone: () - -
C-Phone: (908)-720-1921 Sex : M
Race : Black / African America Chart:
Account: 15347Co#: 70 Policy#: PJWC089285
D & H RISK MGMNT (WC)
PO BOX 68
NEWTON, NJ 07860PRIMARY INSURANCE
Insured Name: RICKY GRAHAM
DOB : 01/22/1951
Group Number:
Plan Name :
Onset Date : 09/17/24

Name : PATIENTS CHOICE

FACILITY INFORMATION
Phone:
Fax :Status: Ordered
Doctor: Warshauer, Jeffrey M., D.O.
3 PROGRESS STREET, SUITE 1
EDISON, NJ 08820-1180DIAGNOSTIC IMAGING ORDER
Ordered : 10/10/24 8:02 am
Sched : 00/00/00
Acquired: 00/00/00
Req# : 7943
Phone : (908)-364-7801
Fax : (908)-222-2757UPIN : NPI: 1558360222
Id : 47-2470918Test Name:
MRI Foot W/O Contrast Right
Dx: S90.31xD Contusion of right foot, subsequent encounterPriority
Routine
Acc#
7943-9098

Ordering Provider's Signature:


Electronically signed by Warshauer, Jeffrey M., D.O. D.O. on 10/10/24 at 8:02 am