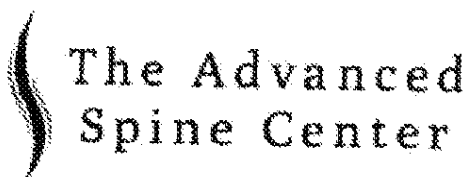


F A X S H E E T

Date: May-01-2023 05:08:00
To:
Subject: Patient Document
Fax Number: 9739401852
To Company:
From Name: Duke, Bianca
From Company: The Advanced Spine Center Morristown
From Facility: The Advanced Spine Center Morristown
Support Contact:
Number of Pages(s): 4

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160 E. Hanover Ave., Ste 201
Morristown, NJ 07960

1125 Route 22
Bridgewater, NJ 08807

333 Mount Hope Ave., Ste 140
Rockaway, NJ 07866

579 Cranbury Rd., Ste H
East Brunswick, NJ 08816

Mailing Address: P.O. Box 2266, Morristown, NJ 07962

Phone (973) 538-0900

Fax (973) 538-0909

Brief Note / Office Visit Summary - Worker's Comp

Patient: KRISTOPHER SOTO

Physician: Charles A. Gatto, M.D.

Date of Service: 5/1/23

Employer:

Ins Co: D & H

Claim#: PLB075883

DOI: 06/09/2021

NCM: DEE

Phone: 973-940-1851

EXT: 292

Fax: 973-940-1852

Diagnoses / ICD-10:

Causal Relationship: ☒ Yes ☐ No

C75 C76 cent stenosis
w/ T12 Blist Runk

adjuvant
w/ home pwa C67
ACOR

Treatment Plan:

cent mmt & XJ
probable cent surg & C75 C76

Work Status:

No Work

☐ No Change in work status from last visit.

☒ Full Duty with No Restrictions

Restricted Duty: The patient is Able / Unable to do usual job with following restrictions:

Restrictions:

Lifting: up to _____ lbs.

Pushing/Pulling: up to _____ lbs.

Drive for Work: Yes / No

Bending: Yes / No

Sitting: Yes / No

Climbing: Yes / No

Standing: Yes / No

Overhead Activity: Yes / No

Walking: Yes / No

_____ 5 Minute Breaks Each Hour

Estimated date of return to usual job with some restriction:

Estimated date of return to full and unrestricted duties/activities:

Has patient reached Maximal Medical Improvement?

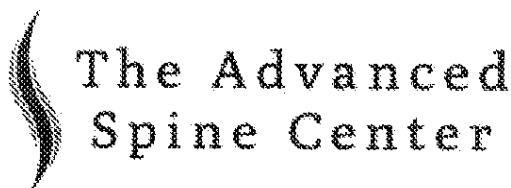
Yes ☒ No

Follow up Visit:

Charles A. Gatto, M.D.
Spine Surgery

Jason Lowenstein, M.D.
Pediatric/Adult Neurosurgery
Spine Surgery

George S. Nasel, M.D.
Spine Surgery



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WORK STATUS

Patient: Kristopher Soto

Date of Service: 5/1/23

Diagnoses / ICD-10:

☒ The patient was seen in our office today:

☐ The patient is out of School / Gym / Sports until: _____

Work Status:

No work

☐ No Change in work status from last visit

☒ Full Duty with No Restrictions

Restricted Duty: ☐ patient is able to do usual job with following restrictions:

☐ patient is unable to do usual job -- see following restrictions:

Restrictions:

Lifting: up to _____ lbs.

Pushing/Pulling: up to _____ lbs.

Drive for Work: Yes / No

Bending: Yes / No

Sitting: Yes / No

Climbing: Yes / No

Standing: Yes / No

Overhead Activity: Yes / No

Walking: Yes / No

_____ 5 Minute Breaks Each Hour

The above work restrictions are in effect until: _____

Estimated date of return to usual job with some restriction:

Estimated date of return to full and unrestricted duties/activities:

Has patient reached Maximal Medical Improvement?

Yes ☒ No

Follow-up Visit:

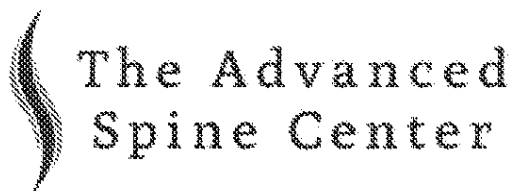
5/15/23 @ 15

Sarah J. Kies, PA-C Michelle Lohman, PA-C Tanya Lugo, PA-C

Charles A. Gallo, M.D.
Spine Surgery

Jason Lowenstein, M.D.
Pediatric/Adult Scoliosis
Spine Surgery

George S. Naseef, M.D.
Spine Surgery



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STUDIES

Patient Name:

Kristopher Soto

DOB:

3/9/83

Date:

5/1/23

Diagnosis:

C75 C6 Stenosis / Cervical Myeloma

WVA C67 AOK

PATIENTS: DO NOT BOOK YOUR STUDY UNTIL YOU HAVE CONTACTED OUR OFFICE SPECIALIST AT 973-538-0900 ext. 594 SO WE MAY SUBMIT THE AUTHORIZATION REQUEST.

Please Accept this as a Prescription / Request for:

☐ X-RAY: ☐ Lumbar Spine: AP / Lat / Flex / Ext ☐ Cervical Spine: AP / Lat / Flex / Ext

☐

☒ MRI - with continuous axial images oriented parallel to disc spaces:

☐ Lumbar Spine ☒ Cervical Spine ☐ Thoracic Spine

☒ Without Contrast ☐ With Contrast ☐ With and without Contrast

☐

☐ CT - with small cuts and sagittal and coronal reconstructions:

☐ Lumbar Spine ☐ Cervical Spine ☐ Thoracic Spine ☐ Bone windows only

☐

☐ Myelogram / with follow up CT: ☐ Lumbar spine ☐ Cervical Spine ☐ Thoracic Spine

☐ Bone Scan: ☐ Total Body ☐ Lumbar Spine / Pelvis / SPECT Images ☐ Other: ☐ Bone Density

☐ EMG/NCV

☐ Blood Work: ☐ CBC w/platelets ☐ ESR ☐ Rheum Factor ☐ HbA1C
☐ SMA-7 ☐ C-Reactive Protein ☐ ANA ☐ B12 / Folate
☐ SMA-20 ☐ SPEP ☐ Lyme Titer ☐ RPR
☐ PT/PTT ☐ PSA ☐ HLA-B27 ☐ T3 / T4 / TSH

Sarah J. Rios, PA-C Michele Lohman, PA-C Tanya Lugo, PA-C

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Spine Surgery

Jason Lowenstein, M.D.
Pediatric/Adult Scoliosis
Spine Surgery

George S. Nascef, M.D.
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