

To: Kristin Wikinson Company: 2 and HAlternotive (1) / 50 Ution. Fax Number: 973-940-1952

Phone Number: 97-3-940-1851 EX+ .259

Mi Gaz-brown, Veronico-

From: Or. Chopro.

Date: 10/23/23

Claim Number: PLB085105

DDI(Notnescr)		
Work Note	Next Appointment Date: _	116/23 Time: 1:45 pm
Visit Note	Location:	West Orange Westfield
✓ PT Rx	Please Fax Next Appointm	ı
MRI RX		1 201 10 (200) 200-5213
Surgery		Thank You.
Other .	CONFIDENTIAL NOTICE	

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116 South Euclid Ave - Suite 1 - Westfield • NJ 07090 • Phone: (908) 588-2311 • Fax: (908) 588-2319

Vinny Chopra, MY Matthew Griffin, MD Nicholas Delancy, MD John Griffin, MD Prashant Patel, MD Mohammad Athar, MD



1.16 S. Buelld Ave. Suite 1 Westfield, NJ 07490 Officer (908)-508-231,1 Fest (900)-434-2319

300 Executive Br. Sulfo, 1.10 West Orange, N) 07032 Phones (973)-424-9875 Fax: (973)-434-9578

Date: 10/23/23

Re: Goy-hown, Veronice

To whom it may concern,

This letter is to certify that Gray Journ, venn Chas been under my orthopedic care. This patient was seen and evaluated by Dr. Chopra in our office today.

The patient's work/school status is:

as of 10/23/23, until their next evaluation: 11/0/23

If you have any questions, feel free to call our office. Thank you.

Sincerely.

Vinay Chopra, MD

GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 10/23/2023



GAY-BROWN, Veronica

65 Y old Female, DOB: 12/25/1957 Account Number: 21780 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ-07060-1386 Home: 908-315-4373 Guarantor: Gay-brown, Veronica Insurance: DandH Alternative Appointment Facility: Genesis Orthopaedic and Spine

10/23/2023

Vinay Chopra, MD

Current Medications

Taking

Enalapril Maleate

Past Medical History

High blood pressure.

Surgical History

breast biopsy

Family History

Father: deceased Mother: deceased 2 sister(s) - healthy.

Social History

Tobacco Use:

Tobacco Use/Smoking Are you a: former smoker How long has it been since you last emoked? >20 years

Alleraies

Sessonale

Hospitalization/Major Diagnostic Procedure

Denies Past Hospitalization

Review of Systems

General/Constitutional:

Denies Fever. Denies Headache. Denies Weight loss. Allergy/Immunology:

Runny nose denies. Itchy

eyes denies. Congestion denies. Ophthalmologic:

Vision loss denies. Blurry vision denies. Red eye denies. ENT:

Decreased hearing denies. Nosebleed denies. Sore throat denies.

Endocrine:

Reason for Appointment

1. Head injury

History of Present Illness

Work Comp Information:

Claim Number: PLB085103. Date of injury: 09.05.2023. Case Manager: Kristin Wikinson.

Employer: Plainfield BOE 1200 Myrtle Ave, Plainfield NJ, 07063 P:

908-731-4323.

Job Description: Teacher.

Insurance Company: D&H Alternative Risk Solution.

Phone Number: 973-940-1851 EXT: 259.

Fax: 973-940-1852.

WC Injury:

Questions:

Was your supervisor notified immediately? Yes Did you continue working after you were injured? No Did you go to the emergency room? No Were X-rays and/or MRIs taken? Yes Rate your pain today on a scale of 1-10: 5 Have you ever experienced similar symptoms in the past? No How long have you been employed at your current job? 19 What is your current work status? Currently employed

Have you ever been treated by a Chiropractor? Yes

Head/Brain trauma:

c/o Head/brain trauma occurred The patient is presenting today for a work place injury which occurred on 09/05/2023. She states she is a teaching assistant and slipped and well on a waxed floor hitting her left side of her head and forehead on the floor. She immediately had headaches, neck pain, also injured her hands and bilateral knees. She has headaches, dizziness, light sensitivity, and states she was seen by urgent care and diagnosed with a concussion. .

Vital Signs

Temp: 97 F, HR: 72 /min, BP: 137/81 mm Hg, Wt: 155 lbs, BMI: 26.6 Index, Ht: 64 in, Oxygen sat %: 97 %, Ht-cm: 162.56 cm, Wt-kg: 70.31 kg.

Examination

GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 10/23/2023

Cold intolerance denies. Excessive sweating denies. Excessive thirst denies. Respiratory:

Cough denies. Shortness of breath denies. Wheezing denies. Cardiovascular:

Chest pain denies.
Palpitations denies. Leg
swelling denies.
Gastrointestinal:

Diarrhea denies. Nausea denies. Vomiting denies.

Hematology:

Easy bleeding denies. Easy bruising denies. Swollen glands denies. Genitourinary:

Hematuria denies. Difficulty urinating denies. Frequent urination denies. Burning w/Urination denies. Skin:

Skin infection denies. Hives denies

. Rash denies.

Neurologic:

Dizzlness denies.

Headache denies. Setzures denies.

Tremor denies.

Psychiatric:

Panic attacks denies. Depressed mood denies. Suicidal thoughts denies.

General Examination:

GENERAL APPEARANCE: in no acute distress, well developed, well nourished, alert, oriented x 3.

GAIT: non-antalgic gait.

HEAD: normocephalic, atraumatic.

EYES: pupils equal, round, , extraocular movement intact (EOMI), sclera anicteric.

EARS: normal, hearing intact to whispered voice.

NOSE: no nasal drainage. ORAL CAVITY: mucosa moist.

THROAT: oropharynx clear, oral mucosa without lesions.

NECK/THYROID: neck supple, no cervical lymphadenopathy, , no thyromegaly.

SKIN: no suspicious lesions, warm and dry, no erythema, no rashes, no rounds.

HEART: no murmurs, regular rate and rhythm, \$1, \$2 normal.

LUNGS: clear to auscultation bilaterally.

ABDOMEN: normal, bowel sounds present, soft, nontender, nondistended.

EXTREMITIES: no clubbing, cyanosis, or edema. PERIPHERAL PULSES: normal, 2+ throughout.

NEUROLOGIC: nonfocal, sensory exam intact, cranial nerves 2-12 grossly intact, deep tendon reflexes 2+ symmetrical, Babinski absent.

Assessments

- 1. Concussion without loss of consciousness, initial encounter So6.oXoA (Primary)
- 2. Vestibular dysfunction after traumatic injury H81.90

Treatment

 Concussion without loss of consciousness, initial encounter PROCEDURE: PT/OT Modalities PRN

PROCEDURE: Vestibular Rehabilitation 3x week for 2 weeks
Clinical Notes: I spent a significant amount of time with the patient here
today interviewing the patient,

speaking to her case manager, reviewing accident history and records, performing a physical exam, neurological exam, neurobehavioral testing, neuropsychological testing, and balance testing at this visit. The patient has findings consistent with a concussion due to a direct head injury at work. At this time, her symptoms are mildly to moderately elevated and her balance testing shows vestibular dysfunction however her cognition tests are within normal limits. Given her findings, the patient will start a physical therapy program focused on vestibular rehabilitation which has shown in recent studies to improve recovery from a concussion. She will follow up in 2 weeks for further care and testing and will be placed on full duty. I spent the following amount of time on concussion testing, analysis, and interpretation:

CPT 96116: 60 minutes (1PM - 2PM)
CPT 96121: 180 minutes (2PM - 5PM)
CPT 96132: 60 minutes (1:30PM - 2:30PM)
CPT 96133: 180 minutes (2:30PM - 5:30PM)
CPT 97750: 42 minutes (2:15PM - 2:57PM)

2. Vestibular dysfunction after traumatic injury

GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 10/23/2023

PROCEDURE: PT/OT Modalities PRN

PROCEDURE: Vestibular Rehabilitation 3x week for 2 weeks

Clinical Notes: I spent the following amount of time on concussion testing, analysis, and interpretation:

analysis, and interpretation: CPT 96116: 60 minutes (1PM - 2PM)

CPT 96121: 180 minutes (2PM - 5PM)

CPT 96132: 60 minutes (1:30PM - 2:30PM)

CPT 96133: 180 minutes (2:30PM - 5:30PM)

CPT 97750: 42 minutes (2:15PM - 2:57PM)

3. Others

Clinical Notes: The patient also complains of neck pain and bilateral knee and hand pain from her fall at work. I will speak to case manager to see if we can get these bodily injuries authorized and evaluated.

Procedures

Neurobehavioral Testing:

Neurobehavioral testing Full Neurobehavioral testing done in the office shows a symptoms score of 63 today which is elevated as it shows findings consistent with headache, "Pressure in head", nausea, dizziness, blurred vision, balance problems, sensitivity to light, sensitivity to noise, feeling slowed down, feeling like "in a fog", "don't feel right", difficulty concentrating, difficulty remembering, fatigue and low energy, confusion, drowsiness, trouble falling asleep, feeling more emotional, irritability, nervousness and anxiety. She also performed full cognition testing and was able to score 46/46 as her cognition is within normal limits.

Neuropsychological Testing:

Neuropsychological testing Full Neuropsychological testing was done today in the office which showed the following results: Verbal Memory composite score of 40/7%, Visual Memory composite score of 45/24%, Visual Motor Speed composite 23.75/36%, Reaction Time composite score 0.96/42%, Impulse Control composite 1.

Balance testing:

Balance testing Balance testing done in the office shows the following results: Eyes Open Firm Surface Sway Index 0.76, Eyes Closed Firm Surface Sway Index 1.69, Eyes Open Foam Surface Sway Index 1.45, Eyes Closed Foam Surface Sway Index 2.81, Composite Score Sway Index 1.68 which shows findings consistent with vestibular dysfunction.

Work/School Excuse:

Work Excuse Full duty.

Visit Codes

99245 Office Consultation New/Estab Patient 80 Min. Modifiers: 25

Procedure Codes

96116 Neuro Behavioral Exam, Modifiers: 59

96121 Neuro Behavioral Exam, Each Additional Hour, Units: 3.00,

Modifiers: 50

96132 Neuro Psychological Exam, Modifiers: 59

96133 Neuro Psychological Exam, Each Additional Hour, Units: 3.00,

Modifiers: 50

97750 Physical Performance Test/Meas W/Reprt Ea 15 Min, Units: 3.00,

Modifiers: 59

10/24/23, 9:21 AM Print Preview

GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 10/23/2023

Follow Up 2 Weeks

Vinary Chopia

Electronically signed by VINAY CHOPRA , MD on 10/23/2023 at 05:52 PM EDT

Sign off status: Completed.

Genesis Orthopaedic and Spine 116 S EUCLID AVE WESTFIELD, NJ 07090-2184 Tel: 908-588-2311 Fax: 908-588-2319

Progress Note: Vinay Chopra, MD 10/23/2023

Note generated by aClimealWorks &MR/PM Settwere (www.eClinicalWorks.com)

Order Form

Req/Ctrl# (CD-): 87305

Vinay Chopra, MD

Genesis Orthopaedic and Spine

116 S EUCLID AVE,

WESTFIELD, NJ, 07090-2184

908-588-2311 908-588-2319

NPI: 1730329079 Sport Medicine

Gay-brown, Veronica, Female, 12/25/1957 ID: 21780

Today: 10/24/2023 09:21 AM Order Date: 10/23/2023 02:15 PM

Primary Insurance Name: DandH Alternative Rick Solutions Insurance Address: PO BOX 68 , NEWTON , NJ , 07860-0068

Subscriber Number: PLB085103 Insured Name: Gay-brown, Veronica

Address: 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ 07060-1386

Priority Routine Test Name

Vestibular Rehabilitation 3x week for 2 weeks

Assessment(s)

Instructions

- S06.0X0A, Concussion without loss of consciousness, initial

encounter

- H81.90, Vestibular dysfunction

efter traumatic injury

Vinay Clopen

Electronically Signed By: Vinay Chopra, MD

Signature of Patlent/Guardian

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Gay-brown, Veronica, F, 12/25/1957

Order Form

Genesis Orthopaedic and Spine

₱ 116 S EUCLID AVE,

WESTFIELD, NJ, 07090-2184

908-588-2311 🛖 908-588-2319

Reg/Ctri# (CD-): 87305 Vinay Chopra, MD NPI: 1730329079

Sport Medicine

Gay-brown, Veronica, Female, 12/25/1957 ID: 21780

908-315-4373 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ 07060-1386

Today: 10/24/2023 09:21 AM Order Date: 10/23/2023 02:15 PM

Primary Insurance Name: DandH Alternative Risk Solutions Insurance Address: PO BOX 68 , NEWTON , NJ , 07880-0088

Subscriber Number: PLB085103 Insured Name: Gay-brown, Veronica

Address: 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ 07060-1388

Priority Routine Test Name

PT/OT Modalities PRN

Assessment(s)

Instructions

- 806.0X0A, Concussion without loss of consciousness, initial

encounter

- H81.90, Vestibular dysfunction

after traumatic injury

Vinay Olopia.

Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

Gay-brown, Veronica, F, 12/25/1957