## EDISON-METUCHEN ORTHOPAEDIC GROUP

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Matthew Garfinkel, M.D. Franklin Chen, M.D. Mohnish Ramani, M.D.

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## **MRI Imaging Request Form**

Please contact our office if you have not heard from our office or the Facility in 5 business days.

All Insurance: We need the name & location of MRI facility to proceed with authorization.

If you do not know the facility before you leave our office, please call us back at 732-839-1942. If you have a worker's compensation claim, please call 732-839-1936 for status of authorization.

Account 169736

Cell phone: (973) 412-5284

Date: 6/21/2024 Weight 200lbs

Name: Reyna Barrios DOB:9/27/1991

Home Phone: Work Phone:

Sex:female

Address: 1489 Liberty Ave Hillside NJ 07205

Insurance Dietz And Hammer

ID# HFT061824

Group ID

Insurance Address: Po Box 68 Newton NJ 07860

Reason for test:R/O Lateral Meniscus Tear

Diagnosis:

M23.8X1 Other internal derangements of right knee

Referring Physician: Dr. Nilesh J Patel

Precautions / Special Instructions:

## **Test Requested:**

MRI of the right knee without contrast

Please fax report to Edison-Metuchen Orthopaedic Group at (732) 494-8762. Phone (732) 494-6226.

Patient Seen by: Nilesh J. Patel, M.D.