

Referral Queue ID: 480539501

## Patient Referral

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### Patient Information:

<b>Patient:</b>	Norris, Dorothy	<b>Home Phone:</b>	(908) 233-4308	
<b>SSN:</b>		<b>Work Phone:</b>		<b>Ext:</b>
<b>Address:</b>	718 Castleman Drive	<b>DOI:</b>	10/13/2023	<b>Cell Phone:</b>
	WESTFIELD, NJ 07090	<b>DOB:</b>	08/22/1961	(908) 627-2824

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### Employer Contact:

<b>Employer Location:</b>	Plainfield Board of Education	<b>Contact:</b>	Wendy Hardy
<b>Address:</b>	1200 Myrtle Ave	<b>Role:</b>	Additional Contact
	Plainfield, NJ 070631139	<b>Phone:</b>	(908) 731-4323 <b>Ext.:</b>
<b>Auth. by:</b>		<b>Fax:</b>	

### Program:

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### Billing Information:

<b>Carrier:</b>	D&H Alternative Risk Solutions	<b>Billing:</b>	D&H Alternative Risk Solutions
<b>Address:</b>	PO Box 68	<b>Address:</b>	PO Box 68
	Newton, NJ 078600068		Newton, NJ 078600068
<b>Phone:</b>	(973) 940-1851	<b>Claim #:</b>	PLB085618
<b>Fax:</b>	(908) 684-9911		
<b>Notes:</b>	Alt name, Dietz & Hammer		

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**\*\*NOTE TO THE ABOVE FACILITY OR PHYSICIAN:**

Please send a copy of all reports on this patient to the payer and the center.

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### Therapy Referral Information:

Referral Status: Pending Referral Dept

### REFERRAL PRESCRIPTION

Provider Type: Physical Therapist

#### Requested

<b>Total Treatments:</b>	6	<b>Request Comments:</b>	
<b>Treatments per Week:</b>	3	<b>Auto Generated</b>	
<b>Treatment Duration:</b>	2 Weeks		

#### Diagnosis

ICD9 Code	ICD10 Code	Description
847	S13.9XXA	SPRAIN OF JOINTS AND LIGAMENTS OF UNSP PARTS OF NECK, INIT-S13.9XX

#### Body Part

Part	Laterality
Neck	Bilateral

#### Additional Notes

Auto Create - Physical Therapy Referral

Date: 11/28/2023

Referring Provider: Anthony Tarasenko, MD  
\*\*\* Provider Signature on File \*\*\*

Number of Visits to Date: 0

#### Authorized

<b>Total Treatments:</b>	<b>Auth Number:</b>
<b>Treatments per Week:</b>	<b>Effective Date:</b>
<b>Treatment Duration:</b>	<b>Expiration Date:</b>
<b>Authorization Comments:</b>	<b>Units Authorized:</b>

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## Transcription

Patient: Norris, Dorothy Service ID #: 486720493  
Soc. Sec. #: Referral Q ID: 480539502  
Date of Birth: 8/22/1961 Age: Injury Date: 10/13/2023 Service Date: 11/28/2023  
Service Location: CMC - NNJ South Plainfield Employer: Plainfield Board of Education  
Claim Number: PLB085618 Dictated By: Anthony Tarasenko, MD  
Diagnosis: S50.01XA CONTUSION OF RIGHT ELBOW, INITIAL ENCOUNTER-S50.01XA

### Notes:

#### Reason For Visit

Chief Complaint: The patient presents today with Rec; Pt was shoved by student and fell; pt states knee is feeling worse but she had her first pt session for it yesterday so it may be related to that, pt also has pain in neck. Self reported.  
Workers Compensation - Patient s Occupation: Teacher.  
Work Status History: patient has been working regular duty.  
Chaperone was offered: Patient declined the presence of a chaperone

#### Vitals

##### Vital Signs

Recorded: 28Nov2023 08:14AM  
Systolic: 116  
Diastolic: 80  
BP Cuff Size: Regular - Adult  
Heart Rate: 74  
Respiration: 14  
Height: 5 ft 10 in  
Weight: 230 lb  
BMI Calculated: 33 kg/m2  
BSA Calculated: 2.22

Vital signs were reviewed and found to be unremarkable.

#### Medical History

No significant past medical history.

##### FAMILY HISTORY:

The patients family history has been obtained and carefully reviewed. It has been determined that the patients family history is noncontributory to the current injury.

#### Surgical History

History of No pertinent past surgical history (Z78.9)

##### Allergies

amoxicillin

No Known Food Allergies

##### History of Present Illness

##### Musculoskeletal:

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Documented On: 11/28/2023 8:47 AM

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### Notes:

Dorothy Norris is returning for a recheck of injury(s): presents with right knee pain and oked to evaluate for the neck cc states occasional numbness of the right hand on movement, states she would like to go back to work, reviewed the mri of the right knee unremarkable report pain of the lower knee cap persists explained that is tendinitis as per report no tears seen, presentally on pt, plan for orthopedic referral and mri of the c spine due to pain ro hnp..  
Neck Pain:.  
Elbow Pain:.  
Work Status History: patient has been working regular duty. She has attended 1 visits since the last visit.

#### Review of Systems

Genitourinary: no missed menstrual period.  
Musculoskeletal: joint pain, neck pain, joint stiffness and limping.  
Integumentary: Reviewed and found to be negative.  
Neurological: Reviewed and found to be negative.

#### Physical Exam

Constitutional: well appearing and well nourished.  
Head/Face: Normocephalic and atraumatic.  
Eyes: conjunctiva and lids with no swelling, erythema or discharge. Pupils are equal, round, and reactive to light and cornea clear. Normal optic discs and normal retina.  
Extraocular movements intact.  
ENT: No erythema or edema of the external ears or nose. Tympanic membranes translucent with normal light reflex. Canals patent without erythema. Hearing is grossly normal. nasal mucosa and turbinates are normal without edema or erythema. No nasal discharge. Lips, teeth and gums are normal. Oropharynx with no erythema, edema, exudate or lesions.  
Neck: The neck is supple and symmetric with midline trachea and no masses.  
Breasts: breast exam was declined.  
Pulmonary: no increased work of breathing or signs of respiratory distress.  
Cardiovascular: normal rate and rhythm, normal S1 and S2, without gallops or rubs.

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### Notes:

2. Physical Therapy Referral Physical Therapy See Referral Comment! Done:  
28Nov2023

Ordered;

For: Neck sprain; Ordered By: Tarasenko, Anthony Performed: Due:  
12Dec2023

Laterality 1 : Bilateral

Body Part 1 : Neck - Soft Tissue

PT Necessary : PT is medically necessary to address objective  
impairment/functional

loss and to expedite return to full activity

Frequency : 3 x week

Duration : 2 weeks

Therapy Order : Evaluate and Treat

otc analgesics

NO MEDICATIONS WERE PRESCRIBED OR DISPENSED FOR THIS ENCOUNTER.

### Discussion/Summary

mri of the right knee unremarable with discusion, plan for orthopedic  
referral

mri of the c spine due to pain ro hnp

pt to the neck and right knee to continue

regular duty as trail basis

Chaperone was declined

A comprehensive discussion was held with the patient to review the  
diagnosis and  
overall treatment plan and objectives. The patient verbally acknowledged  
their  
understanding of all items discussed, and was afforded an opportunity to  
get

clarification and/or ask additional questions regarding the proposed  
treatment(s).

Patient was instructed to keep their scheduled appointments for follow-up  
and/or

return to Concentra.

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### Notes:

Activity Status and Restrictions  
Treatment Status: Patient to be seen by physician at next visit.  
Returning for follow-up: 12 4 2023  
Diagnostic test referral.  
Continue Therapy/Rehabilitation as scheduled.  
Activity Status  
Return to full work/activity today.  
Work Duration  
Patient may work their entire shift.

### Signatures

Electronically signed by : Anthony Tarasenko, M.D.; Nov 28 2023 8:47AM  
EST -  
Author  
Electronically signed by : Anthony Tarasenko, M.D.; Nov 28 2023 8:47AM  
EST - Author

Documented By: Anthony Tarasenko, MD  
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### Notes:

Abdomen: soft, non-distended, and no tenderness.  
Genitourinary: pelvic exam was declined.  
Lymphatic: no lymphadenopathy.  
Musculoskeletal: Normal gait. No tenderness or swelling of extremities.  
Range of motion is within normal limits. Normal muscle strength and tone.  
Shoulder: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal. No signs of impingement.  
Upper Arm: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Right Elbow: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Forearm: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Wrist: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Hand/Fingers: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Hip: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Thigh: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Right Knee: There is tenderness diffusely over the anterior knee, in the distal IT band and in the proximal patella tendon. Palpation Reveals: no crepitus, normal warmth, no patella ballottement, no popliteal mass and no quadriceps tendon defect.  
Full range of motion.  
Lower Leg: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Ankle: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.  
Foot/Toes: Appearance normal. No deformity. No tenderness. Full range of motion.  
Strength normal.

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### Notes:

Chest: Chest is normal in appearance.  
Cervical Spine: Cervical Spine: Tenderness in the level c4567 cervical spine.  
Palpation reveals bilateral muscle spasms, left-sided muscle spasms and right-sided muscle spasms. Full range of motion.  
Thoracic Spine: without kyphosis, no tenderness, full range of motion.  
Lumbosacral Spine: with normal lordosis, no tenderness and full ROM.  
Straight leg raises negative bilaterally.  
Skin: Normal without rashes or lesions. Normal turgor.  
Neurologic: No interosseous weakness present. cranial nerves grossly intact. normal mental status. upper and lower extremity reflexes symmetric bilaterally. sensation intact to light touch. normal finger to nose and negative Romberg. Gait evaluation demonstrated a normal gait, full weight bearing, no ataxia, no shuffling.  
Psychiatric: . Judgment and insight are normal. oriented to person, place, and time. speech is appropriate in content and delivery. Recent and remote memory is intact. mood and affect are appropriate.  
Presents with right knee pain with unremarable mri report and reviewed with patient, plan for orthopedic referral and neck pain plan for mri of c spine, and pt to the right knee and neck region the right elbow resolved, plan for regular duty.

### Functional Restoration and Status of Healing

Dorothy Norris is approximately 75% of the way toward meeting the physical requirements of her job.

### ASSESSMENT

1. Contusion of right elbow, initial encounter (S50.01XA)
2. Contusion of right knee, initial encounter (S80.01XA)
3. Neck sprain (S13.9XXA)

### Plan

1. MRI, spinal canal and contents, cervical; without contrast material;  
Requested for:28Nov2023;  
Perform:Outside Facility/Radiology - OCCM; Due:05Dec2023;Ordered;  
For:Neck sprain; Ordered By:Tarasenko, Anthony;

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