



## GARDEN STATE ORTHOPAEDIC ASSOCIATES

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Fellowship in Total Joint Replacement

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Certificate of Added Qualification Hand Surgery

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**Kenneth A. Levitsky, M.D.**

Special Consultant  
FAAOS  
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Fellowship in Foot & Ankle

### PHYSICAL THERAPY PRESCRIPTION LETTER OF MEDICAL NECESSITY

**DATE:** 06/11/2024

**NAME:** Edwin Velasco

**D.O.B.:** 07/31/1974

**ACCOUNT #:** 1213680

**DIAGNOSIS:** S/P Right Knee Arthroscopy and Menisectomy

**THERAPY TYPE:** PHYSICAL THERAPY  
EVALUATION AND TREATMENT

**FREQUENCY:** 3 x per week x 6 weeks

**ATTENTION:** Treating physical therapist: Please note the following guidelines below:

**MODALITIES:** AS NEEDED

### NOTES:

Patient is cleared to start PT immediately.

6/11/2024 5:42 PM (EDT)

Erik Zachwieja MD

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