

Referral Queue ID: 480562587

Patient Referral

Patient Information:

Patient:	Anderson, Emma	Home Phone:	(201) 247-0817
SSN:		Work Phone:	Ext:
Address:	12 wadworth terrace	DOI:	07/10/2024
	CRANFORD, NJ 07016	DOB:	10/29/1959
		Cell Phone:	(201) 247-0817

Employer Contact:

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

Program:

Billing Information:

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

****NOTE TO THE ABOVE FACILITY OR PHYSICIAN:**
Please send a copy of all reports on this patient to the payer and the center.

Referral Queue ID: 480562587

Patient Referral

Patient Information:

Patient:	Anderson, Emma	Home Phone:	(201) 247-0817
SSN:		Work Phone:	
Address:	12 wadworth terrace	DOI:	07/10/2024
	CRANFORD, NJ 07016	DOB:	10/29/1959
		Ext:	
		Cell Phone:	(201) 247-0817

Facility Referral Information:

Referral Status: Auto-Submit
Consult and treat

Priority: Routine

REFERRAL PRESCRIPTION

Recommended Facility:

Facility Type: Test Center

Facility Service: MRI

Referral Purpose

Referral Focus	Hemisphere	Ruleout	Contrast
Knee	Left	N/A	Without

Diagnosis

ICD9 Code	ICD10 Code	Description
844.8	S86.912A	STRAIN OF UNSP MUSC/TEND AT LOWER LEG LEVEL, LEFT LEG, INIT-S86.912A

Additional Notes:

Auto Create - MRI, Left Knee; without contrast material

Date: 7/15/2024

Referring Provider: Anthony Tarasenko, MD

*** Provider Signature on File ***

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

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