



WC Facsimile Transmittal Request

To: Kristin Wilkinson

From: Dr. Chafra

Company: Dana H Alternative Risk Solution

Date: 11/27/23

Fax Number: 973-940-1852

Claim Number: PLB085103

Phone Number: 973-940-1851 Ext. 259

Re: Goy-brown, Veronica

<input type="checkbox"/>	DDI (not needed)
<input checked="" type="checkbox"/>	Work Note
<input checked="" type="checkbox"/>	Visit Note
<input checked="" type="checkbox"/>	PT/RX
<input checked="" type="checkbox"/>	MRI/RX
<input type="checkbox"/>	Surgery
<input type="checkbox"/>	Other

Next Appointment Date: 12/11/23 Time: 2:15 pm

Location: West Orange ☒ Westfield

Please Fax Next Appointment DDI to (908) 588-2319

Thank You.

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Vinay Chopra, MD
Matthew Griffin, MD
Nicholas Delaney, MD
John Griffin, MD
Prashant Patel, MD
Mohammad Athar, MD



116 S. Euclid Ave, Suite 1
Westfield, NJ 07090
Office: (908)-588-2311
Fax: (908)-434-2319

300 Executive Dr. Suite 110
West Orange, NJ 07052
Phone: (973)-434-9575
Fax: (973)-434-9578

25 Lindsley Dr. Ste 208
Morristown, NJ 07960
Phone: 862-345-7955
Fax: 862-345-7988

Date: 11/27/23

Re: Gay-brown, Veronica

To whom it may concern,

This letter is to certify that Gay-brown, Veronica has been under my orthopedic care.

This patient was seen and evaluated by Dr. Chopra in our office.

The patient's work/School status is: Full Duty

as of 11/27/23, until their next evaluation: 12/11/23.

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

Sincerely,

Vinay Chopra, MD

11/28/23, 10:28 AM

Print Preview

GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 11/27/2023

**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

Risk Solutions

Appointment Facility: Genesis Orthopaedic and Spine

11/27/2023

Vinay Chopra, MD

Current Medications**Taking**

- Cetirizine HCl 10 MG Capsule 1 capsule Orally Once a day
- 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 smoked? >20 years

Allergies

Seasonale

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.

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? *13*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 fell 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. The patient is following up today on 11/27/23 stating she has been to 5 total sessions of vestibular therapy, only 1 since her last visit. She also went to the ER on November 13, 2023 due to vertigo and dizziness that was causing her to vomit. In the ER, they did a CT of her head, which was negative. She states she was unable to go to more than 1 session of vestibular therapy due to getting sick as well. She continues to have ongoing headaches, dizziness, and nausea..

Progress Note: Vinay Chopra, MD 11/27/2023

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

11/28/23, 10:28 AM

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GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 11/27/2023

Endocrine:

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:

Dizziness denies. Headache denies. Seizures denies. Tremor denies.

Psychiatric:

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

Vital Signs

Wt: 135 lbs, BMI: 23.17 Index, Ht: 64 in, Ht-cm: 162.56 cm, Wt-kg: 61.23 kg.

Examination**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 wounds.

HEART: no murmurs, regular rate and rhythm, S1, S2 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, subsequent encounter - S06.0X0D (Primary)
2. Vestibular dysfunction after traumatic injury - H81.90

Treatment

1. Concussion without loss of consciousness, subsequent encounter

IMAGING: MRI : Brain with and without contrast

concussion, r/o axonal shearing, bleed

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. The patient will also be sent for an MRI of the brain for further evaluation due

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to her recent ER visit due to vomiting and nausea. 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)

a. Vestibular dysfunction after traumatic injury

IMAGING: MRI: Brain with and without contrast

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Procedures

Neurobehavioral Testing:

Neurobehavioral testing Full Neurobehavioral testing done in the office shows a symptoms score of 92 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 0.55, Eyes Closed Firm Surface Sway Index 1.36, Eyes Open Foam Surface Sway Index 1.35, Eyes Closed Foam Surface Sway Index 2.52, Composite Score Sway Index 1.45 which shows findings consistent with vestibular dysfunction.

Work/School Excuse:

Work Excuse Full duty.

Visit Codes

99215 Office/Outpatient Visit Est. Modifiers: 25

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GAY-BROWN, Veronica DOB: 12/25/1957 (65 yo F) Acc No. 21780 DOS: 11/27/2023

Procedure Codes

96116 Neuro Behavioral Exam, Modifiers: 59

96121 Neuro Behavioral Exam, Each Additional Hour, Units: 3.00 ,
Modifiers: 59

96132 Neuro Psychological Exam, Modifiers: 59

96133 Neuro Psychological Exam, Each Additional Hour, Units: 3.00 ,
Modifiers: 5997750 Physical Performance Test/Meas W/Reprt Ea 15 Min, Units: 3.00 ,
Modifiers: 59**Follow Up**

2 Weeks

Electronically signed by VINAY CHOPRA , MD on 11/27/2023 at
03:37 PM EST

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 11/27/2023

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

Order Form**Genesis Orthopaedic and Spine**

116 S EUCLID AVE,

WESTFIELD, NJ, 07090-2184

908-588-2311 908-588-2319

Req/Ctrl# (CD-): 66336

Vinay Chopra, MD

NPI: 1730328079

Sport Medicine

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

Today: 11/28/2023 10:28 AM

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

Order Date: 11/27/2023 01:45 PM

Primary Insurance Name: DandH Alternative Risk 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	Test Name	Assessment(s)	Instructions
Routine	PT/OT Modalities PRN	- S08.0X0D, Concussion without loss of consciousness, subsequent encounter - H81.90, Vestibular dysfunction after traumatic injury	

Vinay Chopra

Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

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

Req/Ctrl# (CD-): 88336

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: 11/28/2023 10:28 AM

Order Date: 11/27/2023 01:45 PM

Primary Insurance Name: DandH Alternative Risk Solutions
Insurance Address: PO BOX 88 , NEWTON , NJ , 07860-0088
Subscriber Number: PLB085103
Insured Name: Gay-brown, Veronica
Address: 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ 07060-1386

Priority	Test Name	Assessment(s)	Instructions
Routine	Vestibular Rehabilitation 3x week for 2 weeks	- 806.0X0D, Concussion without loss of consciousness, subsequent encounter - H81.90, Vestibular dysfunction after traumatic injury	



Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

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

Order Form

Genesis Orthopaedic and Spine

116 S EUCLID AVE,
WESTFIELD, NJ, 07090-2164
908-588-2311 908-588-2319

Req/Ctrl# (CD-): 88336

Vinay Chopra, MD

NPI: 1730329079

Sport Medicine

Gay-brown, Veronica, Female, 12/25/1957 ID: 21760
908-315-4373 33 WESTERVELT AVE, Apt #315, PLAINFIELD, NJ 07060-1386

Today: 11/28/2023 10:28 AM

Order Date: 11/27/2023 01:45 PM

Primary Insurance Name: DandH Alternative Risk 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	Diagnostic Name	Assessment(s)	Instructions
STAT	MRI : Brain with and without contrast Notes: concussion, r/o axonal shearing, bleed	- S06.0X0D, Concussion without loss of consciousness, subsequent encounter - H81.90, Vestibular dysfunction after traumatic injury	



Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

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