

GSOA - Clifton

925 CLIFTON AVE, STE 106
CLIFTON, NJ, 07013-2724

973-330-0700 973-928-2805

Req/Ctrl# (CD-): 122814

Long K. Bui-Le, PA-C

NPI: 1508077124
Physician Assistant

Theodore, Noroy, Male, 01/05/1984

ID: 540924

Today: 04/19/2024 01:08 PM

Order Date: 04/18/2024 12:15 AM

853 Irvington Ave, Hillside, NJ 07205

Primary Insurance Name: DH ALTERNATIVE RISK SOLUTIONS
Insurance Address: PO BOX 68 , NEWTON , NJ , 07860-0069
Subscriber Number: PJWC087603
Insured Name: Roselle DPW,
Address: 42 CHARLES ST, CLARK, NJ 07066-2404

Priority	Test Name	Assessment(s)	Instructions
Routine	PHYSICAL THERAPY Notes: 3x4. Evaluate and treat with modalities.	- S39.012A, Strain of lumbar region, initial encounter	

Long K. Bui-Le, PA-C

Electronically Signed By: Long K. Bui-Le, PA-C

Signature of Patient/Guardian