

SETH R.QUELER, M.D.
LICENSE # 25MA07432800 NPI# 1811947187
ORTHOPAEDIC SURGERY

GARDEN STATE ORTHOPAEDIC ASSOCIATES, P.A.
28-04 BROADWAY, FAIR LAWN, NJ 07410
400 FRANKLIN TPK,SUITE112, MAHWAH, NJ 07430
33-41 NEWARK STREET, HOBOKEN, NJ 07030
925 CLIFTON AVE, SUITE 106, CLIFTON, NJ 07013
22 MADISON AVE, SUITE 202, PARAMUS, NJ 07652
2 SYLVAN WAY, PARSIPPANY, NJ 07054
Pre-certification: Phone: (201) 475-0019 FAX:(973) 685-9779

Name: Jerrez Hayward D.O.B: 09/05/1988 34 years

Address: 17 Van Winkle St

Apt D
Bloomfield, NJ 07003

Patient's Phone#: 973-703-5927 Alternate Phone #:

ACCOUNT NUMBER: 1224024

Rx:

LEFT. FOREFOOT. MRI Without Contrast.CLOSED.

ATTENTION TO 1ST MTP JOINT.

Procedures ordered or performed:
MRI: DX 1: S93.522A.

Diagnosis: Sprain of metatarsophalangeal joint of left great toe, initial encounter 12-01-22 00:00:00

Please give DISC to patient.



Provider Signature: *Seth R. Queler, M.D.*

Date: 12-01-2022

INS.CO: D&H Alternative Risk Solutions
PO Box 68FredonNJ07860

Authorization #: *Contact Name:* *Facility:*

Expiration: