

GSOA - Clifton
925 CLIFTON AVE, STE 106
CLIFTON, NJ, 07013-2724
973-330-0700 973-928-2805

Req/Ctrl# (CD-): 146357
William G. Thomson, PA-C
NPI: 1932168028
Physician Assistant

Fredericks, Adlar, Male, 04/02/1981 ID: 543851
862-216-5262 95 SOUTH ESSEX AVE, APT 207, ORANGE, NJ 07050

Today: 07/30/2024 12:12 PM
Order Date: 07/26/2024 08:45 AM

Primary Insurance Name: DH ALTERNATIVE RISK SOLUTIONS
Insurance Address: PO BOX 68 , NEWTON , NJ , 07860-0069
Subscriber Number: IWC088704
Insured Name: Irvington Township,
Address: 1 CIVIC SQ, IRVINGTON, NJ 07111-2997

Priority	Diagnostic Name	Assessment(s)	Instructions
Routine	MRI : Knee without contrast, Right Notes: Vachon, Andrea 07/30/2024 12:12:28 PM EDT > Please refer patient to ImageCare-West Orange.	- S83.411A, Sprain of medial collateral ligament of right knee, initial encounter	Please provide disc to patient for their next appt.


Electronically Signed By: William G. Thomson, PA-C

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

Fredericks, Adlar, M, 04/02/1981