

Order Form

F-Seaview Orthopaedic
222 Schanck Road, Ste 300
Freehold, NJ, 077282974
732-462-1700 732-303-8314

Req/Ctrl# (CD-): 6119048
Arthur P. Vasen, MD, Ph.D.
NPI: 1134188113
Provider Code: 173906
Orthopedic Surgery

Perez, Luis, Male, 03/17/1978 ID: 781049
Cell: 848-219-3990 4 7th Street, Matawan, NJ, US 07747

Today: 06/14/2024 10:35 AM
Order Date: 06/14/2024 10:00 AM

RESPONSIBLE PARTY/GUARANTOR INFO:

Name: City of Perth Amboy,
DOB:

Primary Insurance Name: D and H Management Corp WC
Insurance Phone: 973-940-1851
Insurance Address: PO Box 88 , Newton , NJ , 07860
Subscriber Number: PJWC088150
Insured Name: City of Perth Amboy,
Address: 14 Brookwood Parkway, Jackson, NJ 08527

Priority	Diagnostic Name	Fast	Assessment(s)	Instructions
Routine	PT Occupational Therapy-Prom 3 x a week for 2 weeks	No	- S60.221A, Contusion of right hand, initial encounter	
Routine	PT Occupational Therapy-Arom	No	- S60.221A, Contusion of right hand, initial encounter	
Routine	PT Occupational Therapy-Strengthening Exercise	No	- S60.221A, Contusion of right hand, initial encounter	
Routine	PT Modalities- PRN	No	- S60.221A, Contusion of right hand, initial encounter	
Routine	PT Evaluate and Treat	No	- S60.221A, Contusion of right hand, initial encounter	
Routine	PT Occupational Therapy Evaluation	No	- S60.221A, Contusion of right hand, initial encounter	



Electronically Signed By: Arthur P. Vasen, MD, Ph.D.

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

Perez, Luis, M, 03/17/1978