



160 E. Hanover Avenue, Suite 201
Morristown, NJ 07960
333 Mount Hope Avenue, Suite 140
Rockaway, NJ 07866
720 US 202/206 North, Bldg. 2
Bridgewater, NJ 08807

Mailing Address: P.O. Box 2266, Morristown, NJ 07962

Phone (973) 538-0900

Fax (973) 538-0909

WORK STATUS

Patient: Nathaniel James

Date of Service: 4/5/24

Diagnoses / ICD-10: _____

☒ The patient was seen in our office today:

_____ The patient is out of School / Gym / Sports until: _____

Work Status: No work _____ No Change in work status from last visit

Full Duty with No Restrictions

Restricted Duty: _____ patient is **able** to do usual job with following restrictions:
_____ patient is **unable** to do usual job – see following restrictions:

<u>Restrictions:</u>	Lifting: up to _____ lbs.	Pushing/Pulling: up to _____ lbs.
	Drive for Work: Yes / No	Bending: Yes / No
	Sitting: Yes / No	Climbing: Yes / No
	Standing: Yes / No	Overhead Activity: Yes / No
	Walking: Yes / No	_____ 5 Minute Breaks Each Hour

The above work restrictions are in effect until: _____

Estimated date of return to usual job with some restriction:

Estimated date of return to full and unrestricted duties/activities:

Has patient reached Maximal Medical Improvement? Yes No

Follow-up Visit:

Charles A. Gatto, M.D.
Spine Surgery

Jason Lowenstein, M.D.
Pediatric/Adult Scoliosis
Spine Surgery

George S. Naseef, M.D.
Spine Surgery

Sarah J. Ries, PA-C Michele Lohman, PA-C Tanya Lugo, PA-C

The Advanced Spine Center

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STUDIES

Patient Name: Nathaniel James DOB: 4/12/70 Date: 4/5/24

Diagnosis: Prior UPBx M54.16

CT & RE 1E Denison radiic.

PATIENTS: DO NOT BOOK YOUR STUDY UNTIL YOU HAVE CONTACTED OUR OFFICE SPECIALIST AT 973-538-0900 ext. 594 SO WE MAY SUBMIT THE AUTHORIZATION REQUEST.

Please Accept this as a Prescription / Request for:

☐ X-RAY: ☐ Lumbar Spine: AP / Lat / Flex / Ext ☐ Cervical Spine: AP / Lat / Flex / Ext

☒ MRI - with continuous axial images oriented parallel to disc spaces:

☒ Lumbar Spine ☐ Cervical Spine ☐ Thoracic Spine
☒ Without Contrast ☐ With Contrast ☐ With and without Contrast

☐ CT - with small cuts and sagittal and coronal reconstructions:

☐ Lumbar Spine ☐ Cervical Spine ☐ Thoracic Spine ☐ Bone windows only

☐ Myelogram / with follow up CT: ☐ Lumbar spine ☐ Cervical Spine ☐ Thoracic Spine

☐ Bone Scan: ☐ Total Body ☐ Lumbar Spine / Pelvis / SPECT Images ☐ Other: ☐ Bone Density

☐ EMG/NCV

☐ Blood Work: ☐ CBC w/platelets ☐ ESR ☐ Rheum Factor ☐ HbA1C
☐ SMA-7 ☐ C-Reactive Protein ☐ ANA ☐ B12 / Folate
☐ SMA-20 ☐ SPEP ☐ Lyme Titer ☐ RPR
☐ PT/PTT ☐ PSA ☐ HLA-B27 ☐ T3 / FT4 / TSH

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Nathaniel James PA-C

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