

EDISON-METUCHEN ORTHOPAEDIC GROUP

10 Parsonage Road, Suite 500, 5th Floor • Edison, NJ 08837 • PH (732) 494-6226 • FAX (732) 494-8762
Matthew Garfinkel, M.D. Nilesch Patel, M.D. Manisha Chahal, M.D.
Franklin Chen, M.D. Todd Ryan, D.O.
Mohnish Ramani, M.D. David M. Idank, D.O.

MRI Imaging Request Form

Please contact our office if you have not heard from our office or the Facility in 5 business days.

All Insurance: We need the name & location of MRI facility to proceed with authorization.

If you do not know the facility before you leave our office, please call us back at 732-839-1942. If you have a worker's compensation claim, please call 732-839-1936 for status on authorization.

Account 167040 Cell phone : Please make an appointment for your MRI so that this can be authorized through your insurance Date: 3/13/2024
Name: Joseph Sulikowski Home Phone: Weight
DOB: 7/27/1977 Work Phone: (732) 248-0383 Sex: male

Address: 22 Winthrop Rd Edison NJ 08817

Insurance Dietz And Hammer

ID# PJWC086322

Group ID

Insurance Address : Po Box 68 Newton NJ 07860

Reason for test: Shoulder Pain

Diagnosis:

S43.015D Anterior dislocation of left humerus, subsequent encounter, S42.252D Displaced fracture of greater tuberosity of left humerus, subsequent encounter for fracture with routine healing, S46.012D Strain of muscle(s) and tendon(s) of the rotator cuff of left shoulder, subsequent encounter, M25.312 Other instability, left shoulder, M23.8X1 Other internal derangements of right knee, S83.512D Sprain of anterior cruciate ligament of left knee, subsequent encounter, S53.442D Ulnar collateral ligament sprain of left elbow, subsequent encounter

Referring Physician: Dr. Todd Ryan

Precautions / Special Instructions:

Test Requested:

MRI of the left shoulder without contrast

Please fax report to Edison-Metuchen Orthopaedic Group at (732) 494-8762. Phone (732) 494-6226.

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