71 Passaic Ave Florham Park, NJ Phone: 1-888-422-3044

Fax: 973-328-3753

Elbow

Shoulder

Start Date

197 Ridgedale Ave, Suite 130

Cedar Knolls, NJ 07927 Phone: 973-998-8950 Fax: 973-998-7610

Reparel Under Sleeve

Specify: _____

Patient Information		<u>Or</u>	Ordering Doctor Information	
Name:	Kirby Johnston	Name:	Andrew Willis	
Address:	5 Burnham Parkway	Address:	197 Ridgedale Avenue,	
	Morristown, NJ 07960		Cedar Knolls, NJ 07927	
Phone:	(908) 938-9099	NPI #:		
DOB:	02/14/1958	Phone:	973-538-2334	
Diagnosis: LEFT SHOULDER GHJ CUFF ICD-10 Code: M75.122				
TEAR ARTHROPATHY				
Surgical Procedure: LEFT SHOULDER TOTAL SHOULDER ARTHROPLASTY.				
DOS: $06/01/2023$ Left X Right Limb: SHOULDER Order date: $03/28/23$				
Surgery Location: Surgical Center At Cedar Knolls				
Dr. Signature:		5	Sign Date: 03/28/23	
DURABLE MEDICAL EQUIPMENT PRESCRIPTION				
Post Op Brace	Cold Therapy	Up	per Extremity Bracing	
Knee	Knee 🗌	Abo	duction Pillow Sling	X
Elbow	Shoulder X Ankle	Ne	utral Wedge (Bankart)	
CPM & CPM Pad Kit Hip		Otl	ner	
Knee		Kne	Knee Walker (Roll-A-Bout)	

Crutches

Crutches

Patient Height _____