

Concentra Medical Centers (NJ)

135 Raritan Center Pkwy EDISON, NJ 08837
Phone: (732) 225-5454 Fax: (732) 417-0003

Service Date: 12/23/2022**Referral Queue ID:** 480504441**Patient Referral****Patient Information:**

Patient:	Stavish, Len	Home Phone:	(732) 604-3292
SSN:	149-72-7185	Work Phone:	Ext:
Address:	810 South St. POINT PLEASANT, NJ 08742	DOI:	12/05/2022
		DOB:	12/08/1964
		Cell Phone:	(732) 604-3292

Employer Contact:

Employer Location:	City of Perth Amboy-Police D	Contact:	Maria Rivera
Address:	260 High St Perth Amboy, NJ 088614451	Role:	Additional Injury Contact
Auth. by:		Phone:	(732) 771-2508
		Ext.:	
		Fax:	

Program:**Billing Information:**

Carrier:	D&H Alternative Risk Solutions	Billing:	D&H Alternative Risk Solutions
Address:	PO Box 68 Newton, NJ 078600068	Address:	PO Box 68 Newton, NJ 078600068
Phone:	(973) 940-1851	Claim #:	PJWC082121-02
Fax:	(908) 684-9911		
Notes:	Alt name, Dietz & Hammer		

****NOTE TO THE ABOVE FACILITY OR PHYSICIAN:**

Please send a copy of all reports on this patient to the payer and the center.

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Facility Referral Information:

Referral Status: Autoclose
Consult and treat

Priority: Routine

REFERRAL PRESCRIPTION**Recommended Facility:**

Facility Type: Test Center

Facility Service: MRI

Referral Purpose

Referral Focus	Hemisphere	Ruleout	Contrast
Shoulder	Left	N/A	Without
		N/A	Without

Diagnosis

ICD9 Code	ICD10 Code	Description
840.3	S46.912A	STRAIN UNSP MUSC/FASC/TEND AT SHLDR/UP ARM, LEFT ARM, INIT-S46.912A

Additional Notes:

Auto Create - MRI, Left Shoulder; without contrast material(s)
Referral Comments from Touchworks: MRI Left shoulder without contrast r/o RTC tear

Date: 12/23/2022**Referring Provider:** Kerry McMahon, MD*** *Provider Signature on File* *******NOTE TO THE ABOVE FACILITY OR PHYSICIAN:**

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