

**Concentra Medical Centers (NJ)**

116 Corporate Blvd Ste E SOUTH PLAINFIELD, NJ 07080  
Phone: (908) 757-1424 Fax: (908) 757-5678

**Service Date:** 11/22/2022**Referral Queue ID:** 480501169**Patient Referral****Patient Information:**

<b>Patient:</b>	Albert, Dexter	<b>Home Phone:</b>	(908) 644-9966
<b>SSN:</b>	580-06-7703	<b>Work Phone:</b>	<b>Ext:</b>
<b>Address:</b>	982 Prospect Ave	<b>DOI:</b>	10/13/2022
	PLAINFIELD, NJ 07060	<b>DOB:</b>	04/19/1961
		<b>Cell Phone:</b>	(908) 644-9966

**Employer Contact:**

<b>Employer Location:</b>	Plainfield Board of Education	<b>Contact:</b>	Deborah Boyd
<b>Address:</b>	1200 Myrtle Ave	<b>Role:</b>	Primary Contact
	Plainfield, NJ 070631139	<b>Phone:</b>	(908) 731-4243
<b>Auth. by:</b>		<b>Ext.:</b>	
		<b>Fax:</b>	

**Program:****Billing Information:**

<b>Carrier:</b>	D&H Alternative Risk Solutions	<b>Billing:</b>	D&H Alternative Risk Solutions
<b>Address:</b>	PO Box 68	<b>Address:</b>	PO Box 68
	Newton, NJ 078600068		Newton, NJ 078600068
<b>Phone:</b>	(973) 940-1851	<b>Claim #:</b>	
<b>Fax:</b>	(908) 684-9911		
<b>Notes:</b>	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.

Referral Queue ID: 480501169

## Patient Referral

### Patient Information:

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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
840.9	S43.402A	UNSPECIFIED SPRAIN OF LEFT SHOULDER JOINT, INITIAL ENCOUNTER-S43.402A

#### **Additional Notes:**

Auto Create - MRI, Left Shoulder; without contrast material(s)

**Date:** 11/22/2022

**Referring Provider:** Jennifer Scarozza, PA-C

*JH Scarozza PA-C*

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