



Genesis

Orthopaedic and Spine

WC Facsimile Transmittal Request

Attention: Carolina Shell Re: Lewis, Darrell
To: D+H Claim #: IWC085775-01
From: Dr. Chopra Total Pages: 10
Date: 5/7/24 Sender's Ref Fax #: (973) 434 9578
✓ Fax: 973-940-1852 Email: _____

- ☐ DDI
☒ Work Note
☒ Visit Note
☒ PT RX
☒ MRI RX
☐ Surgery
☐ Other

Next Appointment Date: 5/22/24 Time: 6pm

Location: ☐ West Orange ☐ Westfield ☒ Morristown
☐ Middletown ☐ Ridgewood

Please Fax Next Appointment DDI

ThankYou

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Order Form

Genesis Orthopaedic and Spine WO

300 EXECUTIVE DR, STE 110
WEST ORANGE, NJ, 07052-3329
973-434-9576 973-434-9578

Req/Ctrl# (CD-): 97281
Vinay Chopra, MD
NPI: 1730329079
Sport Medicine

LEWIS, Darrell, Male, 01/17/1980 ID: 21963- WC/NF
Home: 973-570-0411 Cell: 973-570-0411 24 LAFAYETTE AVE, SUMMIT, NJ 07901-7501
Email: cheyenne80darrell@aol.com

Today: 05/08/2024 09:31 AM
Order Date: 05/07/2024 02:30 PM

RESPONSIBLE PARTY/GUARANTOR INFO:
Name: LEWIS, Darrell
DOB: 01/17/1980

Primary Insurance Name: DandH Alternative Risk Solutions
Insurance Phone: 973-940-1851
Insurance Address: PO BOX 68 , NEWTON , NJ , 07860-0068
Subscriber Number: IWC08577501
Insured Name: LEWIS, Darrell
Address: 24 LAFAYETTE AVE, SUMMIT, NJ 07901-7501

| Priority | Test Name | Assessment(s) | Instructions |
|----------|----------------------|----------------------------------|--------------|
| Routine | PT/OT Modalities PRN | - M54.12, Cervical radiculopathy | |



Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

LEWIS, Darrell, M, 01/17/1980

Order Form

Genesis Orthopaedic and Spine WO

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NPI: 1730329079
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Subscriber Number: IWC08577501
Insured Name: LEWIS, Darrell
Address: 24 LAFAYETTE AVE, SUMMIT, NJ 07801-7501

| Priority | Test Name | Assessment(s) | Instructions |
|----------|--|----------------------------------|--------------|
| Routine | PT/OT Eval and Treat 3x/week for 2 weeks | - M54.12, Cervical radiculopathy | |



Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

Order generated by eClinicalWorks (www.eclinicalworks.com)

LEWIS, Darrell, M, 01/17/1980



Genesis

Orthopaedic and Spine

Vinay Chopra, MD
 Matthew Griffin, MD
 Nicholas Delaney, MD
 Prashant Patel, MD
 John Griffin, MD
 Jason Sedgwick, DPM

116 S. Euclid Ave, Suite 100
 Westfield, NJ 07090
 P: (908) 588-2311
 F: (908) 588-2319

25 Lindsley Dr, Suite 208
 Morristown, NJ 07960
 P: (862) 345-7988
 F: (862) 345-7988

300 Executive Drive, Suite 101
 West Orange, NJ 07052
 P: (973) 434-9575
 F: (973) 494-9578

1270 NJ 35, Suite 1
 Middletown, NJ 07748
 P: (732) 788-3769
 F: (732) 788-3547

119 Prospect Street, Suite 3
 Ridgewood, NJ 07450
 P: (551) 284-4600
 F: (551) 284-4699

Date: 5/7/24Re: Darrell Lewis

To Whom It May Concern,

This letter is to certify that Darrell Lewis has been under my orthopedic care.The patient was seen and evaluated by Dr. Chopra in our office today.

The patient's work/school status is:

Full DutyAs of 5/7/24

until next evaluation:

5/22/24 6pm

If you have any questions please feel free to contact our office at (973) 434-9575. Thank you.

Sincerely,

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Req/Ctrl# (CD-): 07281
Vinay Chopra, MD
NPI: 1730329079
Sport Medicine

LEWIS, Darrell, Male, 01/17/1980 ID: 21963-WC/NF
Home: 973-570-0411 Cell: 973-570-0411 24 LAFAYETTE AVE, SUMMIT, NJ 07901-7501
Email: chayne80darrell@aol.com

Today: 05/08/2024 09:32 AM
Order Date: 05/07/2024 02:30 PM

RESPONSIBLE PARTY/GUARANTOR INFO:
Name: LEWIS, Darrell
DOB: 01/17/1980

Primary Insurance Name: DandH Alternative Risk Solutions
Insurance Phone: 973-940-1851
Insurance Address: PO BOX 68 , NEWTON , NJ , 07860-0068
Subscriber Number: IWC08577801
Insured Name: LEWIS, Darrell
Address: 24 LAFAYETTE AVE, SUMMIT, NJ 07901-7501

| Priority | Diagnostic Name | Assessment(s) | Instructions |
|----------|--|----------------------------------|--------------|
| STAT | MRI : Cervical without Contrast Notes: w/o contrast, r/o radiculopathy | - M54.12, Cervical radiculopathy | |



Electronically Signed By: Vinay Chopra, MD

Signature of Patient/Guardian

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LEWIS, Darrell, M, 01/17/1980

5/8/24, 9:32 AM

Print Preview

LEWIS, Darrell DOB: 01/17/1980 (44 yo M) Acc No. 21963- WC/NF DOS: 05/07/2024

**LEWIS, Darrell**

44 Y old Male, DOB: 01/17/1980

Account Number: 21963- WC/NF

24 LAFAYETTE AVE, SUMMIT, NJ-07901-7501

Home: 973 570 0401

Guarantor: LEWIS, Darrell Insurance: DandH Alternative Risk

Solutions Payer ID: PAPER

Appointment Facility: Genesis Orthopaedic and Spine WO

05/07/2024

Vinay Chopra, MD

Current Medications
None**Past Medical History**

- Medical History Verified.

Surgical History

- achilles tendon repair 8 years ago

Family History

- Father: deceased
- Mother: deceased
- 1 sister(s) - healthy, 1 daughter(s) - healthy.

Social HistoryTobacco Use:

- Tobacco Use/Smoking
Are you a: *never smoker*

Drugs/Alcohol:

- Do you drink alcohol?: Socially.

Allergies

- Seasonals

Hospitalization/Major**Diagnostic Procedure**

- Denies Past Hospitalization

Review of SystemsGeneral/Constitutional:

- Fever denies.
- Night sweats denies.
- Weight loss denies.

Allergy/Immunology:

- Runny nose denies.
- Itchy eyes denies.
- Congestion denies.

Ophthalmologic:

- Vision loss denies.
- Blurry vision denies.
- Red eye denies.

Reason for Appointment

1. Head injury and neck

History of Present IllnessWork Comp Information:

- Claim Number: IWC085775-01.
- Date of Injury: 10/27/2023.
- Case Manager: Carolina Shell.
- Employer: Irvington Township - Police Depart.
- Job Description: Police Officer.
- Length of employment: 8 1/2 years.
- Insurance Company: D&H Alternative Risk Solutions.
- Phone Number: 973-940-1851 Ext: 239.
- Fax: 973-940-1852.

WC Injury:

- Questions:

Was your supervisor notified immediately? *Yes*Did you continue working after you were injured? *No Ambulance to hospital*Did you go to the emergency room? *Yes*Were X-rays and/or MRIs taken? *Yes Returned to ER 11/2/2023CT head Scan*Rate your pain today on a scale of 1-10: *6*Have you ever experienced similar symptoms in the past? *No*How long have you been employed at your current job? *8 years*What is your current work status? *Currently employed Out because of injury*Have you ever been treated by a Chiropractor? *No*Head/Brain trauma:

- c/o Head/brain trauma occurred The patient is presenting today with a head/brain trauma without a loss of consciousness that occurred during work on 10/27/23. The patient works as a police officer and states he was involved a pursuit when he was hit in a head-on collision from a car moving at 80 mph. He was hit on the passenger side, hit his head on the top part of the car, and suffered an abrasion to the top of his head. He went to the ER at St. Barnabas by ambulance the day of the accident, and then returned 5 days later on 11/2/23 for a CT of his head, which was normal. He does not have any prior history of concussions; however, he is currently experiencing symptoms

Progress Note: Vinay Chopra, MD 05/07/2024

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ENT:

- Decreased hearing denies.
- Nosebleed denies.
- Sore throat denies.

Endocrine:

- Cold intolerance denies.
- Excessive sweating denies.
- Excessive thirst denies.

Respiratory:

- Cough denies.
- Shortness of breath denies.
- Wheezing denies.

Cardiovascular:

- Chest pain denies.
- Palpitations denies.
- Leg swelling denies.

Gastrointestinal:

- Diarrhea denies.
- Nausea denies.
- Vomiting denies.

Hematology:

- Easy bleeding denies.
- Easy bruising denies.
- Swollen glands denies.

Genitourinary:

- Hematuria denies.
- Urinary incontinence denies.
- Burning w/Urination denies.

Skin:

- Skin infection denies.
- Hives denies.
- Rash denies.

Neurologic:

- Headache denies.
- Seizures denies.
- Tremor denies.

Psychiatric:

- Panic attacks denies.
- Depressed mood denies.
- Suicidal thoughts denies.

consistent with a concussion including headaches, dizziness, and light sensitivity. The patient is following up today on 05/07/24 and states that his concussion symptoms have resolved. He has done total of 15 sessions of vestibular therapy and states vestibular therapy has helped to improve his symptoms.

Cervical Spine/Neck:

- c/o Neck pain The patient is presenting today with a neck pain without a loss of consciousness that occurred during work on 10/27/23. The patient works as a police officer and states he was involved a pursuit when he was hit in a head-on collision from a car moving at 80 mph. He was hit on the passenger side, hit his head on the top part of the car, and suffered an abrasion to the top of his head. He went to the ER at St. Barnabas by ambulance the day of the accident, and then returned 5 days later on 11/2/23 for a CT of his head, which was normal. The patient is following up today on 05/07/24 and states he experiences ongoing neck pain. Overall pain today is 2/10. The pain is located in the midline spine and radiates slightly to the left shoulder blade. He reports weakness on the left side and denies any numbness or tingling..

Vital Signs

Temp: 97.1 F, HR: 67 /min, BP: 110/80 mm Hg, Wt: 245 lbs, BMI: 35.15 Index, Ht: 70 in, Oxygen sat %: 97 %, Ht-cm: 177.8 cm, Wt-kg: 111.13 kg.

Examination**General Examination:**

- GENERAL APPEARANCE: in no acute distress, well developed, well nourished, alert, oriented x 3.
- GAIT: non-antalgic gait.
- HEAD: normocephalic, atraumatic.
- EYES: pupils equal, round, , extraocular movement intact (EOMI) , sclera anicteric.
- EARS: normal , hearing intact to whispered voice.
- NOSE: no nasal drainage.
- ORAL CAVITY: mucosa moist.
- THROAT: oropharynx clear, oral mucosa without lesions.
- NECK/THYROID: neck supple, no cervical lymphadenopathy, , no thyromegaly.
- SKIN: no suspicious lesions, warm and dry, no erythema, no rashes, no wounds.
- HEART: no murmurs, regular rate and rhythm, S1, S2 normal.
- LUNGS: clear to auscultation bilaterally.
- ABDOMEN: normal, bowel sounds present, soft, nontender, nondistended.
- EXTREMITIES: no clubbing, cyanosis, or edema.
- PERIPHERAL PULSES: normal , 2+ throughout.
- NEUROLOGIC: nonfocal, sensory exam intact, cranial nerves 2-12 grossly intact, deep tendon reflexes 2+ symmetrical, Babinski absent.

Cervical Spine:

- Inspection no deformity, no scoliosis, no kyphosis.
- Skin no signs of erythema, pressure ulcers, rashes, lacerations.

5/8/24, 9:32 AM

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- Range of Motion limited range of motion on flexion, extension, rotation due to pain.
- Palpation positive midline tenderness.
- Stability no instability noted, can sit upright on exam table with minimum effort.
- Special tests positive Spurling's.
- Strength 3/5 strength neck and left upper extremity.
- Neurological 1+ left biceps reflex.

Assessments

1. Concussion without loss of consciousness, subsequent encounter - S06.0X0D (Primary)
2. Vestibular dysfunction of both ears - H81.93
3. Cervical radiculopathy - M54.12

Treatment

1. Concussion without loss of consciousness, subsequent encounter

Clinical Notes: I spent a significant amount of time with the patient here today interviewing the patient, speaking to his case manager, reviewing accident history and records, performing a physical exam, neurological exam, neurobehavioral testing, neuropsychological testing, and balance testing at this visit. At this time, his symptoms are resolving, and his balance testing and his cognition tests are within normal limits. Given his findings, he will be placed on full duty and MMI from concussion standpoint.

I spent the following amount of time on concussion testing, analysis, and interpretation:

CPT 96116: 60 minutes (3PM - 4PM)

CPT 96121: 180 minutes (4PM- 7PM)

CPT 96132: 60 minutes (3:30PM - 4:30PM)

CPT 96133: 180 minutes (4:30PM - 7:30PM)

CPT 97750: 40 minutes (5PM - 5:40PM)

2. Vestibular dysfunction of both ears

Clinical Notes: At this time, his symptoms are resolving and his vestibular testing are within normal limits. Given his findings, he will be placed on full duty and MMI at this time.

I spent the following amount of time on concussion testing, analysis, and interpretation:

CPT 96116: 60 minutes (3PM - 4PM)

CPT 96121: 180 minutes (4PM- 7PM)

CPT 96132: 60 minutes (3:30PM - 4:30PM)

CPT 96133: 180 minutes (4:30PM - 7:30PM)

CPT 97750: 40 minutes (5PM - 5:40PM)

3. Cervical radiculopathy

IMAGING: MRI: Cervical without Contrast

Notes: w/o contrast, r/o radiculopathy

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5/8/24, 9:32 AM

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PROCEDURE: PT/OT Eval and Treat 3x/week for 2 weeks
PROCEDURE: PT/OT Modalities PRN**Clinical Notes:**

After reviewing imaging done in the office today, reviewing external notes, external imaging, and history and discussing findings with the patient, and based off our exam here today, the patient has findings consistent with cervical radiculopathy. Given the patient's findings and failed conservative measures, I am sending the patient for an MRI scan of the cervical spine to further evaluate and to rule out radiculopathy. I have also prescribed him to start physical therapy as this will be important in alleviating his symptoms in the meantime. He was advised against any heavy lifting and avoid high impact activities. The patient will follow up in 2 weeks after his MRI results for further evaluation and care.

Procedures**Neurobehavioral Testing:**

- Neurobehavioral testing Full Neurobehavioral testing done in the office shows a symptoms score of 33 today which shows symptoms resolving. He also performed full cognition testing and was able to score 46/46 as his cognition is within normal limits.

Neuropsychological Testing:

- Neuropsychological testing Full Neuropsychological testing was done today in the office which showed the following results: Verbal Memory composite score of 74/15%, Visual Memory composite score of 34/1%, Visual Motor Speed composite 29.75/17%, Reaction Time composite score 0.72/34%, Impulse Control composite 1.

Balance testing:

- Balance testing Balance testing done in the office shows the following results: Eyes Open Firm Surface Sway Index 0.54, Eyes Closed Firm Surface Sway Index 0.72, Eyes Open Foam Surface Sway Index 0.99, Eyes Closed Foam Surface Sway Index 2.55, Composite Score Sway Index 1.20 which shows findings within normal limits for vestibular testing.

Diagnostic Results:

- Cervical Spine X-Ray 1. cervical spine 3 view x-rays done in the office today shows loss of lordosis.

Work/School Excuse:

- Work Excuse Full duty.

Visit Codes

- 99215 Office/Outpatient Visit Est. Modifiers: 25

Procedure Codes

- 96116 Neuro Behavioral Exam, Modifiers: 59
- 96121 Neuro Behavioral Exam, Each Additional Hour, Units: 3.00 , Modifiers: 59
- 96132 Neuro Psychological Exam, Modifiers: 59
- 96133 Neuro Psychological Exam, Each Additional Hour, Units: 3.00 , Modifiers: 59

5/8/24, 9:32 AM

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- 97750 Physical Performance Test/Meas W/Reprt Ea 15 Min, Units: 3.00 , Modifiers: 59
- 72050 X-RAY EXAM OF NECK SPINE

Follow Up

2 weeks Chopra neck after MRI, MMI for concussion



Electronically signed by VINAY CHOPRA , MD on 05/07/2024 at 03:55 PM EDT

Sign off status: Completed

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