

LIFELINE MEDICAL ASSOCIATES • 831 TENNENT RD., MANALAPAN NJ 07726-8288

**ZZTEST, Testing (id #2252948, dob: 12/13/2000)**

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[ID:11061492-H-27010]

## Referral Order

08/13/2025

To Provider	From Provider
<b>CURIO DIGITAL THERAPEUTICS</b>  <b>10 PRINCETON AVE</b> <b>ROCKY HILL, NJ 08553</b> <b>Phone:</b> <b>Phone: (609) 212-1970</b> <b>Fax:</b> <b>Fax: (908) 264-5144</b>	<b>Lindsay Luke</b> <b>CC144 A Manalapan</b> <b>831 TENNENT RD</b> <b>MANALAPAN, NJ 07726-8288</b> <b>Phone: (732) 972-4200</b> <b>Fax: (833) 449-3234</b>

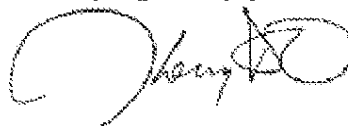
### Referral Order Information

<b>Diagnosis</b>	<b>Mixed anxiety depressive disorder</b> <b>ICD-10: F41.8: Other specified anxiety disorders</b>
<b>Order Name</b>	<b>Orders included: 1</b>  <b>Mixed anxiety depressive disorder</b> <b>ICD-10: F41.8: Other specified anxiety disorders</b> <b>• BEHAVIORAL HEALTH REFERRAL</b> <b>Schedule Within: provider's discretion Note to Provider: EPDS</b> <b>score 7</b>
<b>Notes</b>	<b>EPDS score 7</b>

### Patient Information

<b>Patient Name</b>	<b>ZZTEST, TESTING</b>
<b>Sex - DOB - Age</b>	<b>F 12/13/2000 24yo</b>
<b>Address</b>	<b>1888 SUFFOLK RD</b> <b>COLUMBUS, OH 43221</b>
<b>Phone</b>	<b>H: (614) 747-3355</b> <b>M: (614) 747-3355</b>
<b>Primary Insurance</b>	<b>*SELF PAY*</b>
<b>Secondary Insurance</b>	<b>None recorded.</b>

Electronically Signed by: JENNA LEVY, DO



Lindsay Luke

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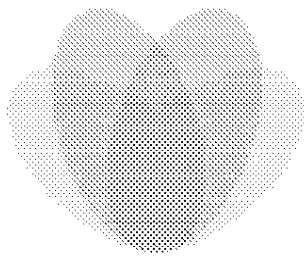
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*Lifeline* Medical  
Associates

Lifeline Medical Associates  
831 TENNENT RD  
MANALAPAN, NJ 07726-8288  
Phone: (732) 972-4200, Fax: (833) 449-3234

Date: 08/13/2025

RE: Testing Zztest, DOB: 12/13/2000, PT ID #2252948

Dear Curio Digital Therapeutics,

The following is a summary of the care this patient has received at our practice. If you have questions, please contact our office.

Sincerely,

Electronically Signed by: JENNA LEVY, DO

## Referral Note for Testing Zztest

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### Encounter Details

Jenna Lewy: 831 TENNENT RD , MANALAPAN, NJ 07726-8288, USA, Ph. tel: (732) 972-4200

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**Demographics**

**Sex:** Female **Ethnicity:** Information not available  
**DOB:** 12/13/2000 **Race:** Information not available  
**Preferred language:** English **Marital status:** Information not available  
**Previous Name:**

**Contact:** 1888 SUFFOLK RD, COLUMBUS, OH 43221, USA, Ph. tel: +1-(614) 747-3355 (Primary Home) tel: +1-(614) 747-3355 (Mobile)  
**Other Addresses:** 1888 SUFFOLK RD, COLUMBUS, OH 43221, USA (Current Billing Address)

**Care Team Members****Primary Care Provider**

RHONA MAGARIL 385 MORRIS AVE, SPRINGFIELD, NJ 07081, Ph. tel: (973) 379-7477

**Reason for Referral****Reason for Visit**

None recorded.

**Assessment**

No assessment recorded.

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**Plan of Treatment**

Reminders	Order Date	Submit Date	Provider	Last Modified By	Organization Details	Last Modified Time	Details
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**Appointments** None recorded.**Lab** None recorded.

<b>Referral</b>	behavioral health referral - EPDS score 7	08/13/2025	08/13/2025	ATHENAFAX	Curio Digital Therapeutics, 10 Princeton Ave, Rocky Hill, NJ, 08553, Ph (609) 212-1970	08/13/2025 08:26:32	
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**Procedures** None recorded.**Surgeries** None recorded.**Imaging** None recorded.**Medication** None recorded.**Orders**

Patient Targets No targets recorded.

Patient Instructions No instructions recorded.

**Results**

None recorded.

**Problems**

Name	Problem SNOMED Code	Status	Onset Date	Resolution Date	Notes	Provider Name and Address	Organization Details	Recorded Time
Pregnancy	77386006	Active	04/28/2025			Meredith Stock null,	NJ - Lifeline Medical Associates	04/28/2025 13:55:36

Problem Notes

None recorded.

**Procedures**

Surgical History

None recorded.

Imaging Results

None recorded.

Procedure Notes

None recorded.

**Medical Equipment**

None Reported.

**Allergies**

No information

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## Medications

No information.

## History of Present Illness

None recorded.

## Physical Exam

Notes:

None recorded.

## Review of Systems

None recorded.

## Vitals

None Recorded

## Social History

None recorded.

## Functional Status

None recorded.

## Mental Status

None recorded.

## Family History

Nothing Reported.

## Medical History

No medical history recorded.

Gynecological History No gynecological history recorded.

Obstetrics History

GPAL:

G 1 P 0 0 0 0

## Immunizations

None recorded.

## Past Encounters

None Reported.

## Goals Section

None Recorded

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Health Concerns Section

Related Observation	LastModified by		Organization Details	LastModified Time
None Recorded				
Concern	Status	LastModified by	Organization Details	LastModified Time
None Recorded				

Notes

None Recorded

Payers

None recorded.