

Patient Name

Provider List - Number of visits and date range for each provider

Prior injury:

DATE RANGE	NUMBER OF VISITS	FACILITY/PROVIDER	PDF REF
10/02/YYYY	1	John Doe, MD <i>(Internal Medicine)</i>	25-26
03/07/YYYY	1	CMC- Orthopedics-Sports Medicine John Doe, MD <i>(Orthopedic Surgeon)</i>	41-43, 52-54
05/08/YYYY	1	NYU Orthopedic Surgery Associates John Doe, PA <i>(Physician assistant)</i>	27-29
10/10/YYYY	1	NY Med John Doe, DC <i>(Chiropractor)</i>	57-58
06/01/YYYY- 06/07/YYYY	16	NY Med John Doe, PT <i>(Physical therapist)</i>	55-56, 72-99

Post injury: Trip and fall injury on 10/06/YYYY

DATE RANGE	NUMBER OF VISITS	FACILITY/PROVIDER	PDF REF
10/07/YYYY	1	John Doe, MD <i>(Emergency Medicine)</i>	14-17
10/07/YYYY	1	City MD Forest Hills John Doe, MD <i>(Radiologist)</i>	18-19
10/07/YYYY, 10/21/YYYY, 11/04/YYYY,	3	MM Medical Service P.C. John Doe, MD <i>(Orthopedic Surgeon)</i>	3-12

Patient Name

11/20/YYYY	1	NYU Langone Health System John Doe, MD (Orthopedic Surgeon)	22
11/13/YYYY- 02/17/YYYY	11	NY Med John Doe, PT (Physical therapist) John Doe, PT (Physical therapist)	59-71

** We have included the physician specialty in the facility/provider column based on the information available in the medical records and web search.*

Medico Legal Request LLC