

**DYNAMIC MOBILE XRAY SERVICES LLC**

3412 BLUESTONE LANE  
E STROUDSBURG, PA 18301-0000  
(201) 952-6420  
dynamicmobilexrays@gmail.com

**Radiology Interpretation**

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**PATIENT NAME:** MUNOZ REYES-ADRIANO  
**DATE OF BIRTH:** 06/10/1987  
**ID/MRN:** 20250428175619799  
**CLINICIAN:** DR. ROOK, ROBERT  
**FACILITY:** DYNAMIC MOBILE XRAY SERVICES LLC  
**DATE OF EXAM:** 04/28/2025  
**HISTORY:** M25.512-PAIN IN LEFT SHOULDER

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**LEFT SHOULDER X-Ray 1 view:**

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or concerning focal osseous lesion.  
**JOINTS:**  
No dislocation. The joint spaces are normal.  
**SOFT TISSUES:**  
The soft tissues are unremarkable.

**IMPRESSION:**

**No acute osseous process.**

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**Electronically Signed By:** Dr. Asif Anwar M.D. 04/30/2025 2:10:00 EDT

**Tech:** Dynamic Mobile Xray Services LLC



**DYNAMIC**  
MOBILE XRAY SERVICES LLC

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Fax: 570-209-5771

Email: dynamicmobilexrays@gmail.com  
website: dynamicmobilexray.com

**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION**

NAME Munoz Reyes Adrian STAT  D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
 PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
 SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X-RAYS (Mark what is needed)**

**CHEST AND ABDOMEN**

- Abdominal KUB 1 View ..... 74019
- Abdominal Flat & Upright 2 View ..... 7402
- Chest 1 View ..... 71045
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70250
- Facial Bones 3 View ..... 70150
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70180
- Mandible .....  (R) .....  (L) ..... 70100
- Sinuses ..... 70210

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73060
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73090
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 3 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73520
- HIP AP / LAT .....  (R) .....  (L) ..... 73501
- Femur 2 View .....  (R) .....  (L) ..... 73550
- Knee 1-2 View .....  (R) .....  (L) ..... 73560
- Knee 3 View .....  (R) .....  (L) ..... 73562
- Tibia / Fibula 2 View ...  (R) .....  (L) ..... 73590
- Ankle 3 View .....  (R) .....  (L) ..... 73610
- Foot 3 View .....  (R) .....  (L) ..... 73630
- Heel 2 View .....  (R) .....  (L) ..... 73650
- Toes 2 View .....  (R) .....  (L) ..... 73660

Other: \_\_\_\_\_

**Ultrasounds (Mark what is needed)**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) .... (R) .... (L) ..... 83970/83971
- Venous Lower (Bilat) .... (R) .... (L) ..... 83970/83971
- Arterial Upper (Bilat) .... (R) .... (L) ..... 83930/83931
- Arterial Lower (Bilat) .... (R) .... (L) ..... 83925/83926
- Arterial with Ankle-Brachial Index (ABI) .... 83922

**Abdomen**

- Complete Abdominal\* ..... 76770
- AORTA / AAA ..... 76708
- Renal ..... 76770
- Bladder\*\* ..... 76857

**Pelvic**

- Pelvic\*\* ..... 76856
- Pelvic Non-OB\*\* ..... 76856
- Testicular / Scrotum ..... 76870
- Soft Tissue Groin ..... 76882

**Head and Neck**

- Thyroid ..... 76536
- Neck Soft tissue ..... 76536
- RCarotid Duplex Doppler ..... 83880

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 76842/76841

Other: \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 83000
- Holter Monitor 24 HR ..... 83228
- Echocardiogram ..... 83306
- Pacemaker check ..... 83283

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
 SIGNATURE ROBERT ROOK TODAY'S DATE 7/28/25

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**Radiology Interpretation**

---

**PATIENT NAME:** MARTINEZ PEREYRA  
**DATE OF BIRTH:** 10/02/1984  
**ID/MRN:** 20250428135812552  
**CLINICIAN:** DR. ROOK, ROBERT  
**FACILITY:** DYNAMIC MOBILE XRAY SERVICES LLC  
**DATE OF EXAM:** 04/28/2025  
**HISTORY:** M54.6-PAIN IN THORACIC SPINE, M25.511-PAIN IN RIGHT SHOULDER

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**SPINE THORACIC X-RAY 2 view:**

Comparison: None

**FINDINGS:**

Multiple views of the thoracic spine demonstrate normal alignment.  
There are no acute fractures or subluxations of the thoracic spine.  
The vertebral body heights and disc spaces are grossly preserved.  
The soft tissues are unremarkable.

If there is further concern or neurological abnormalities on clinical exam, recommend further radiographic views, MRI or CT of the thoracic spine for complete assessment.

**IMPRESSION:**

**No acute fracture or subluxation of the thoracic spine.**

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**RIGHT SHOULDER X-Ray Complete 2 or more views:**

Comparison: None

**FINDINGS:**

Multiple views of the right shoulder show normal alignment at the gleno-humeral joint.  
There are no acute fractures or dislocations.  
The acromioclavicular joint and coracoclavicular spaces are intact.  
The visualized scapula and clavicle are unremarkable.

There are no radiopaque foreign bodies.

No soft tissue swelling is seen.

If there is further concern, follow-up radiographs or MRI of the shoulder may be performed for complete assessment.

**IMPRESSION:**

**No acute fracture or dislocation of right shoulder.**

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**Electronically Signed By:** Dr. Lan Vu M.D. 04/30/2025 1:15:02 EDT

**Tech:** Dynamic Mobile Xray Services LLC



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**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION**

NAME Martinez Pereyra STAT  D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
 PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
 SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X-RAYS (Mark what is needed)**

**CHEST AND ABDOMEN**

- Abdominal KUB 1 View ..... 74018
- Abdominal Flat & Upright 2 View ..... 74022
- Chest 1 View ..... 71045
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70250
- Facial Bones 3 View ..... 70150
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70300
- Mandible .....  (R) .....  (L) ..... 70300
- Sinuses ..... 70210

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73080
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73090
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 4 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73520
- HIP AP / LAT .....  (R) .....  (L) ..... 73501
- Femur 2 View .....  (R) .....  (L) ..... 73550
- Knee 1-2 View .....  (R) .....  (L) ..... 73560
- Knee 3 View .....  (R) .....  (L) ..... 73582
- Tibia / Fibula 2 View .....  (R) .....  (L) ..... 73590
- Ankle 3 View .....  (R) .....  (L) ..... 73610
- Foot 3 View .....  (R) .....  (L) ..... 73630
- Heel 2 View .....  (R) .....  (L) ..... 73650
- Toes 2 View .....  (R) .....  (L) ..... 73660

Other: \_\_\_\_\_

**Ultrasounds (Mark what is needed)**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) ..... (R) ..... (L) ..... 93970/93971
- Venous Lower (Bilat) ..... (R) ..... (L) ..... 93970/93971
- Arterial Upper (Bilat) ..... (R) ..... (L) ..... 93930/93931
- Arterial Lower (Bilat) ..... (R) ..... (L) ..... 93925/93926
- Arterial with Ankle-Brachial Index (ABI) ..... 93922

**Abdomen**

- Complete Abdominal \* ..... 76770
- AORTA / AAA ..... 76708
- Renal ..... 76770
- Bladder \*\* ..... 76857

**Pelvic**

- Pelvic \*\* ..... 76858
- Pelvic Non-OB \*\* ..... 76858
- Testicular / Scrotum ..... 76870
- Soft Tissue Groin ..... 76882

**Head and Neck**

- Thyroid ..... 76538
- Neck Soft tissue ..... 76538
- Carotid Duplex Doppler ..... 93880

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 76842/76841

Other: \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 Hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 93000
- Holter Monitor 24 HR ..... 93228
- Echocardiogram ..... 93308
- Pacemaker check ..... 93293

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
 SIGNATURE [Signature] TODAY'S DATE 4/28/25

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**Radiology Interpretation**

PATIENT NAME: GOMEZ NUNEZ  
DATE OF BIRTH: 07/21/1999  
ID/MRN: 20250428161559960  
CLINICIAN: DR. ROOK, ROBERT  
FACILITY: DYNAMIC MOBILE XRAY SERVICES LLC  
DATE OF EXAM: 04/28/2025  
HISTORY: M25.512-PAIN IN LEFT SHOULDER, M54.6-PAIN IN THORACIC SPINE

**SPINE THORACIC X-RAY 2 view:**

Technique: Thoracic spine, 2 views

Comparison: None.

Findings: There is normal alignment of thoracic spine with no subluxation. There are no compression deformities. The bony mineralization is normal.

**IMPRESSION:**

- 1. Normal alignment of thoracic spine with no subluxation.
- 2. No compression deformities or fractures demonstrated radiographically. If there is persistent pain, follow up CT or MRI may be obtained as clinically warranted.

**LEFT SHOULDER X-Ray Complete 2 or more views:**

Technique: Left Shoulder, 2 views

Comparison: None.

Findings: There is no radiographic evidence of acute fracture or dislocation. The humeral head and neck as well as clavicle and scapula are intact. Visualized lung parenchyma is clear. The bony mineralization is normal.

**IMPRESSION:**

- 1. No definite radiographic evidence of acute fracture or dislocation.
- 2. If there are persistent symptoms, follow up x ray or CT may be obtained as clinically warranted.

Electronically Signed By: Dr. Naiyer Imam M.D. 04/30/2025 2:00:33 EDT

Tech: Dynamic Mobile Xray Services LLC



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**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION**

NAME Gomez nmyer STAT   
D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X-RAYS (Mark what is needed)**

**CHEST AND ABDOMEN**

- Abdominal KUB 1 View ..... 74019
- Abdominal Flat & Upright 2 View ..... 7402
- Chest 1 View ..... 71045
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70250
- Facial Bones 3 View ..... 70150
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70150
- Mandible .....  (R) .....  (L) ..... 70150
- Sinuses ..... 70210

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73060
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73080
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 2 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73520
- HIP AP / LAT .....  (R) .....  (L) ..... 73501
- Femur 2 View .....  (R) .....  (L) ..... 73550
- Knee 1-2 View .....  (R) .....  (L) ..... 73580
- Knee 3 View .....  (R) .....  (L) ..... 73582
- Tibia / Fibula 2 View .....  (R) .....  (L) ..... 73590
- Ankle 3 View .....  (R) .....  (L) ..... 73810
- Foot 3 View .....  (R) .....  (L) ..... 73830
- Heel 2 View .....  (R) .....  (L) ..... 73850
- Toes 2 View .....  (R) .....  (L) ..... 73860

Other: \_\_\_\_\_

**Ultrasounds (Mark what is needed)**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) .... (R) .... (L) ..... 83970/83971
- Venous Lower (Bilat) .... (R) .... (L) ..... 83970/83971
- Arterial Upper (Bilat) .... (R) .... (L) ..... 83930/83931
- Arterial Lower (Bilat) .... (R) .... (L) ..... 83925/83928
- Arterial with Ankle-Brachial Index (ABI) .... 83922

**Abdomen**

- Complete Abdominal \* ..... 76770
- AORTA / AAA ..... 76708
- Renal ..... 76770
- Bladder \*\* ..... 76857

**Pelvic**

- Pelvic \*\* ..... 76858
- Pelvic Non-OB \*\* ..... 76858
- Testicular / Scrotum ..... 76870
- Soft Tissue Groin ..... 76882

**Head and Neck**

- Thyroid ..... 76538
- Neck Soft tissue ..... 76538
- RCarotid Duplex Doppler ..... 83880

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 76842/76841

Other: \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 Hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 83000
- Holter Monitor 24 HR ..... 83228
- Echocardiogram ..... 93308
- Pacemaker check ..... 83283

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
SIGNATURE ROBERT ROOK TODAY'S DATE 4/28/25

**DYNAMIC MOBILE XRAY SERVICES LLC**

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E STROUDSBURG, PA 18301-0000  
(201) 952-6420  
dynamicmobilexrays@gmail.com

**Radiology Interpretation**

---

**PATIENT NAME:** MCKNIGHT KIAHRA  
**DATE OF BIRTH:** 09/12/2005  
**ID/MRN:** 20250428174502653  
**CLINICIAN:** DR. ROOK, ROBERT  
**FACILITY:** DYNAMIC MOBILE XRAY SERVICES LLC  
**DATE OF EXAM:** 04/28/2025  
**HISTORY:** M25.511-PAIN IN RIGHT SHOULDER

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**RIGHT SHOULDER X-Ray Complete 2 or more views:**

Technique: Right Shoulder, 2 views

Comparison: None.

Findings: There is no radiographic evidence of acute fracture or dislocation. The humeral head and neck as well as clavicle and scapula are intact. Visualized lung parenchyma is clear. The bony mineralization is normal.

**IMPRESSION:**

1. No definite radiographic evidence of acute fracture or dislocation.
  2. If there are persistent symptoms, follow up x ray or CT may be obtained as clinically warranted.
- 

**Electronically Signed By:** Dr. Naiyer Imam M.D. 04/30/2025 1:41:35 EDT

**Tech:** Dynamic Mobile Xray Services LLC



**DYNAMIC**  
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**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION**

NAME Mcnight Kighva STAT  D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
 PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
 SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X RAYS (Mark what is needed)**

**CHEST AND ABDOMEN**

- Abdominal KUB 1 View ..... 74019
- Abdominal Flat & Upright 2 View ..... 7402
- Chest 1 View ..... 71045
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70250
- Facial Bones 3 View ..... 70150
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70150
- Mandible .....  (R) .....  (L) ..... 70150
- Sinuses ..... 70212

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73060
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73090
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 3 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73520
- HIP AP / LAT .....  (R) .....  (L) ..... 73501
- Femur 2 View .....  (R) .....  (L) ..... 73550
- Knee 1-2 View .....  (R) .....  (L) ..... 73560
- Knee 3 View .....  (R) .....  (L) ..... 73582
- Tibia / Fibula 2 View .....  (R) .....  (L) ..... 73590
- Ankle 3 View .....  (R) .....  (L) ..... 73610
- Foot 3 View .....  (R) .....  (L) ..... 73630
- Heel 2 View .....  (R) .....  (L) ..... 73650
- Toes 2 View .....  (R) .....  (L) ..... 73660

Other: \_\_\_\_\_

**Ultrasounds (Mark what is needed)**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) ..... (R) ..... (L) ..... 93970/93971
- Venous Lower (Bilat) ..... (R) ..... (L) ..... 93970/93971
- Arterial Upper (Bilat) ..... (R) ..... (L) ..... 93930/93931
- Arterial Lower (Bilat) ..... (R) ..... (L) ..... 93925/93926
- Arterial with Ankle-Brachial Index (ABI) ..... 93922

**Abdomen**

- Complete Abdominal \* ..... 76770
- AORTA / AAA ..... 76708
- Renal ..... 76770
- Bladder \*\* ..... 76857

**Pelvic**

- Pelvic \*\* ..... 76856
- Pelvic Non-OB \*\* ..... 76856
- Testicular / Scrotum ..... 76870
- Soft Tissue Groin ..... 76862

**Head and Neck**

- Thyroid ..... 76536
- Neck Soft tissue ..... 76536
- R Carotid Duplex Doppler ..... 93880

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 76842/76841

Other: \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 Hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 83000
- Holter Monitor 24 HR ..... 93228
- Echocardiogram ..... 93308
- Pacemaker check ..... 93293

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
 SIGNATURE ROBERT ROOK TODAY'S DATE 4/28/25

### DYNAMIC MOBILE XRAY SERVICES LLC

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#### Radiology Interpretation

---

**PATIENT NAME:** GOMEZ JUAN  
**DATE OF BIRTH:** 02/24/1979  
**ID/MRN:** 20250428160633630  
**CLINICIAN:** DR. ROOK, ROBERT  
**FACILITY:** DYNAMIC MOBILE XRAY SERVICES LLC  
**DATE OF EXAM:** 04/28/2025  
**HISTORY:** M54.6-PAIN IN THORACIC SPINE, M25.511-PAIN IN RIGHT SHOULDER, M25.561-PAIN IN RIGHT KNEE

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#### SPINE THORACIC X-RAY 2 view:

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or focal osseous lesion. Bony alignment is anatomic.  
**DISCS/DEGENERATIVE CHANGES:**  
The disc spaces are preserved.  
**SOFT TISSUES:**  
The adjacent soft tissues appear normal.

#### IMPRESSION:

No acute osseous process.

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#### RIGHT SHOULDER X-Ray Complete 2 or more views:

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or concerning focal osseous lesion.  
**JOINTS:**  
No dislocation. The joint spaces are normal.  
**SOFT TISSUES:**  
The soft tissues are unremarkable.

#### IMPRESSION:

No acute osseous process.

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#### RIGHT KNEE X-Ray - 1-2 view:

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or concerning focal osseous lesion.  
**JOINTS:**  
No dislocation. The joint spaces are normal.  
**SOFT TISSUES:**  
The soft tissues are unremarkable.

#### IMPRESSION:

No acute osseous process.

**Electronically Signed By:** Dr. Asif Anwar M.D. 04/30/2025 2:09:42 EDT

**Tech:** Dynamic Mobile Xray Services LLC



**DYNAMIC**  
MOBILE XRAY SERVICES LLC

Phone: (570)243-1888  
Fax: 570-209-5771

Email: dynamicmobilexrays@gmail.com  
website: dynamicmobilexray.com

**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION**

NAME Gomez Juan STAT  D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
 PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
 SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X-RAYS: Mark what is needed**

**CHEST AND ABDOMEN**

- Abdominal KUB 1View ..... 74619
- Abdominal Flat & Upright 2 View ..... 7492
- Chest 1 View ..... 71045
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70250
- Facial Bones 3 View ..... 70160
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70169
- Mandible .....  (R) .....  (L) ..... 70123
- Sinuses ..... 70219

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73060
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73090
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 2 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73520
- HIP AP / LAT .....  (R) .....  (L) ..... 73501
- Femur 2 View .....  (R) .....  (L) ..... 73550
- Knee 1-2 View .....  (R) .....  (L) ..... 73580
- Knee 3 View .....  (R) .....  (L) ..... 73582
- Tibia / Fibula 2 View ...  (R) .....  (L) ..... 73590
- Ankle 3 View .....  (R) .....  (L) ..... 73610
- Foot 3 View .....  (R) .....  (L) ..... 73830
- Heel 2 View .....  (R) .....  (L) ..... 73650
- Toes 2 View .....  (R) .....  (L) ..... 73660

Other : \_\_\_\_\_

**Ultrasounds: Mark what is needed**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) .... (R) .... (L) ..... 93970/93971
- Venous Lower (Bilat) .... (R) .... (L) ..... 93970/93971
- Arterial Upper (Bilat) .... (R) .... (L) ..... 93930/93931
- Arterial Lower (Bilat) .... (R) .... (L) ..... 93925/93926
- Arterial with Ankle-Brachial Index (ABI) .... 93922

**Abdomen**

- Complete Abdominal \* ..... 78770
- AORTA / AAA ..... 78708
- Renal ..... 78770
- Bladder \*\* ..... 78857

**Pelvic**

- Pelvic \*\* ..... 78858
- Pelvic Non-OB \*\* ..... 78858
- Testicular / Scrotum ..... 78870
- Soft Tissue Groin ..... 78882

**Head and Neck**

- Thyroid ..... 78538
- Neck Soft tissue ..... 78538
- RCarotid Duplex Doppler ..... 83880

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 78842/78841

Other \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 Hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 83000
- Holter Monitor 24 HR ..... 93228
- Echocardiogram ..... 93308
- Pacemaker check ..... 83283

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
 SIGNATURE ROBERT ROOK TODAY'S DATE 4/28/25

**DYNAMIC MOBILE XRAY SERVICES LLC**

3412 BLUESTONE LANE  
E STROUDSBURG, PA 18301-0000  
(201) 952-6420  
dynamicmobilexrays@gmail.com

**Radiology Interpretation**

---

**PATIENT NAME:** FERNANDEZ EDUARDO  
**DATE OF BIRTH:** 03/06/1970  
**ID/MRN:** 20250428162711358  
**CLINICIAN:** DR. ROOK, ROBERT  
**FACILITY:** DYNAMIC MOBILE XRAY SERVICES LLC  
**DATE OF EXAM:** 04/28/2025  
**HISTORY:** M25.511-PAIN IN RIGHT SHOULDER, M25.561-PAIN IN RIGHT KNEE

---

**RIGHT SHOULDER X-Ray Complete 2 or more views:**

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or concerning focal osseous lesion.  
**JOINTS:**  
No dislocation. The joint spaces are normal.  
**SOFT TISSUES:**  
The soft tissues are unremarkable.

**IMPRESSION:**

No acute osseous process.

---

**RIGHT KNEE X-Ray - 1-2 view:**

**COMPARISON:**  
None  
**BONES:**  
No acute fracture or concerning focal osseous lesion.  
**JOINTS:**  
No dislocation. The joint spaces are normal.  
**SOFT TISSUES:**  
The soft tissues are unremarkable.

**IMPRESSION:**

No acute osseous process.

---

**Electronically Signed By:** Dr. Asif Anwar M.D. 04/30/2025 2:09:53 EDT

**Tech:** Dynamic Mobile Xray Services LLC



**DYNAMIC**  
MOBILE XRAY SERVICES LLC

Phone: (570)243-1888  
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Email: dynamicmobilexrays@gmail.com  
website: dynamicmobilexray.com

**MOBILE EXAM ORDER FORM**

**PATIENT INFORMATION:**

NAME Fernandez Edmundo STAT  D.O.B. \_\_\_\_\_ SS# \_\_\_\_\_  MALE  FEMALE  
 PATIENT ADDRESS or FACILITY NAME \_\_\_\_\_ ROOM # \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
 PRIMARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_  
 SECONDARY INSURANCE NAME \_\_\_\_\_ INSURANCE ID # \_\_\_\_\_

**X-RAYS (Mark what is needed)**

**CHEST AND ABDOMEN**

- Abdominal KUB 1 View ..... 74619
- Abdominal Flat & Upright 2 View ..... 7402
- Chest 1 View ..... 71046
- Chest AP / LAT ..... 71046
- Ribs 2 View .....  (R) .....  (L) ..... 71100
- Ribs UNILATERAL + PA Chest 3 View ..... 71101
- Ribs BILATERAL + PA Chest 4 View ..... 71111

**HEAD AND NECK**

- Skull ..... 70260
- Facial Bones 3 View ..... 70160
- Orbits 4 View ..... 70200
- Nasal Bones 3 View ..... 70160
- Mandible .....  (R) .....  (L) ..... 70100
- Sinuses ..... 70210

**UPPER EXTREMITIES**

- Clavicle 2 View .....  (R) .....  (L) ..... 73000
- Scapula 2 View .....  (R) .....  (L) ..... 73010
- Shoulder 2 View .....  (R) .....  (L) ..... 73030
- Humerus 2 View .....  (R) .....  (L) ..... 73060
- Elbow 3 View .....  (R) .....  (L) ..... 73080
- Forearm 2 View .....  (R) .....  (L) ..... 73090
- Wrist 3 View .....  (R) .....  (L) ..... 73110
- Hand 3 View .....  (R) .....  (L) ..... 73130
- Fingers 2 View .....  (R) .....  (L) ..... 73140

**SPINE AND PELVIS**

- Cervical Spine AP / LAT ..... 72040
- Thoracic Spine 3 View ..... 72072
- Lumbar Spine 2-3 View ..... 72100
- Pelvis 1-2 View ..... 72170
- Sacrum Coccyx ..... 72220

Reason for study: \_\_\_\_\_

**UPPER EXTREMITIES**

- HIP BILATERAL 4 View ..... 73620
- HIP AP / LAT .....  (R) .....  (L) ..... 73601
- Femur 2 View .....  (R) .....  (L) ..... 73660
- Knee 1-2 View .....  (R) .....  (L) ..... 73660
- Knee 3 View .....  (R) .....  (L) ..... 73662
- Tibia / Fibula 2 View ...  (R) .....  (L) ..... 73690
- Ankle 3 View .....  (R) .....  (L) ..... 73610
- Foot 3 View .....  (R) .....  (L) ..... 73630
- Heel 2 View .....  (R) .....  (L) ..... 73660
- Toes 2 View .....  (R) .....  (L) ..... 73660

Other: \_\_\_\_\_

**Ultrasounds (Mark what is needed)**

**Vascular Studies ( Rule out DVT )**

- Venous Upper (Bilat) .... (R) .... (L) ..... 93970/93971
- Venous Lower (Bilat) .... (R) .... (L) ..... 93570/93971
- Arterial Upper (Bilat) .... (R) .... (L) ..... 93930/93931
- Arterial Lower (Bilat) .... (R) .... (L) ..... 93925/93928
- Arterial with Ankle-Brachial Index (ABI) ... 93922

**Abdomen**

- Complete Abdominal\* ..... 78770
- AORTA / AAA ..... 78708
- Renal ..... 78770
- Bladder\*\* ..... 78857

**Pelvic**

- Pelvic\*\* ..... 78858
- Pelvic Non-OB\*\* ..... 78858
- Testicular / Scrotum ..... 78970
- Soft Tissue Groin ..... 78882

**Head and Neck**

- Thyroid ..... 78538
- Neck Soft tissue ..... 78538
- RCarotid Duplex Doppler ..... 93860

Reason for study: \_\_\_\_\_

**Breast**

- Breast (Bilat) .....  (R) .....  (L) ..... 78842/78841

Other: \_\_\_\_\_

\* Abdominal Ultrasounds require patient not eat or drink at least 6 Hours prior to exam

\*\* Pelvic Ultrasounds require the patient to have a full urinary bladder.

**CARDIAC STUDIES**

- EKG ..... 93000
- Holter Monitor 24 HR ..... 93228
- Echocardiogram ..... 93308
- Pacemaker check ..... 83283

**REQUESTING PHYSICIAN**

NAME ROBERT ROOK NPI # 1295026136 FAX # \_\_\_\_\_  
 SIGNATURE [Signature] TODAY'S DATE 4/28/2025

NOTE TO OFFICIALS: A portable X-RAY is being ordered since this patient would find it difficult to travel to a hospital for a conventional X-ray.