

Appointment Date: _____

Appointment Time: _____

Somers Orthopaedic Surgery & Sports Medicine Group

Address: 664 Stoneleigh Avenue, Suite 300, Carmel, NY 10512

Phone: (800) 352-3600

Email: contact@msrconcierge.com

Business Hours:

Monday- Friday: 8:00 AM- 5:00 PM

Practice Specialties:

Podiatry

Foot and Ankle Surgery

Spine Care & Surgery

Orthopedic Surgery

General Orthopedics &

Surgery

Sports Medicine

Interventional Pain

Management

Prepare for Your Visit:

Please bring a valid photo ID and the following information filled out for your initial appointment:

1. Date of Injury: _____

2. Body Parts Injured: _____

3. Insurance Type: ☐ No-Fault ☐ Workers Compensation ☐ Lien

4. Insurance Company: _____

5. Adjuster's Name and Phone Number: _____

6. Claim Number: _____

7. Representing Law Firm: _____

8. Law Firm Contact Name & Number: _____



***Effortless and accessible injury care—
consider it done!***

800-352-3600
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