

MEDICAL REPORT

Report Date: 12/12/2019

Claim: CLM-HO0218

PATIENT INFORMATION

Name: Sarah Anderson

DOB: 05/23/1958

SSN: 655-59-4709

Phone: 343-829-6118

Address: 4445 Oak Dr, Dallas, TX 64402

MEDICAL FACILITY

Facility: County General Medical Center

Date of Service: 12/10/2019

Treating Physician: Dr. Hernandez

CHIEF COMPLAINT

Patient presents with laceration following motor vehicle accident on 12/10/2019.

DIAGNOSIS

Primary: Laceration

Secondary: Muscle Strain

ICD-10 Codes: S13.4XXA, M62.830

TREATMENT PLAN

Immediate: Physical Therapy

Medications: Ibuprofen 800mg, Cyclobenzaprine 10mg

Follow-up: 2 weeks, Physical therapy 3x weekly for 6 weeks

Restrictions: No heavy lifting, limited driving for 2 weeks

Estimated Recovery: 7 weeks

PROGNOSIS

Excellent if patient follows prescribed treatment plan.

Physician: Dr. Taylor, MD

License: 513283

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