

MEDICAL REPORT

Report Date: 09/02/2019

Claim: CLM-AU0184

PATIENT INFORMATION

Name: James Taylor

DOB: 06/08/1991

SSN: 840-70-4331

Phone: 727-910-6227

Address: 5735 Maple St, Los Angeles, CA 55526

MEDICAL FACILITY

Facility: City Medical Center

Date of Service: 08/31/2019

Treating Physician: Dr. Taylor

CHIEF COMPLAINT

Patient presents with soft tissue injury following motor vehicle accident on 08/31/2019.

DIAGNOSIS

Primary: Soft Tissue Injury

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: 4 weeks

PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Moore, MD

License: 334572

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