

# MEDICAL REPORT

Report Date: 08/17/2019

Claim: CLM-HO0240

## PATIENT INFORMATION

Name: Susan Miller

DOB: 12/23/1991

SSN: 460-24-9227

Phone: 205-274-5661

Address: 4315 Washington Blvd, Chicago, IL 10739

## MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 08/15/2019

Treating Physician: Dr. Garcia

## CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 08/15/2019.

## DIAGNOSIS

Primary: Concussion

Secondary: Muscle Strain

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

## TREATMENT PLAN

Immediate: Emergency Room

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: 8 weeks

## PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Moore, MD

License: 928099

Date: 08/17/2019