

MEDICAL REPORT

Report Date: 12/07/2019

Claim: CLM-AU0014

PATIENT INFORMATION

Name: Joseph Lopez

DOB: 02/16/1989

SSN: 735-61-5820

Phone: 805-412-1545

Address: 1648 Elm Ave, Dallas, TX 23937

MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 12/05/2019

Treating Physician: Dr. Anderson

CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 12/05/2019.

DIAGNOSIS

Primary: Concussion

Secondary: Soft Tissue Damage

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: 10 weeks

PROGNOSIS

Excellent if patient follows prescribed treatment plan.

Physician: Dr. Gonzalez, MD

License: 389800

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