

# MEDICAL REPORT

Report Date: 11/15/2019

Claim: CLM-AU0126

## PATIENT INFORMATION

Name: Thomas Moore  
SSN: 352-76-8156  
Address: 5306 Maple Ln, Dallas, TX 22179

DOB: 02/13/1991  
Phone: 444-763-3147

## MEDICAL FACILITY

Facility: Memorial Hospital  
Date of Service: 11/14/2019

Treating Physician: Dr. Jones

## CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 11/14/2019.

## DIAGNOSIS

Primary: Back Strain  
Secondary: Abrasions  
ICD-10 Codes: S13.4XXA, M62.830

## TREATMENT PLAN

Immediate: Urgent Care  
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

Fair - may require extended treatment period.

Physician: Dr. Hernandez, MD  
License: 494898  
Date: 11/15/2019