

MEDICAL REPORT

Report Date: 10/25/2019

Claim: CLM-HO0081

PATIENT INFORMATION

Name: Sarah Jackson

DOB: 01/02/1967

SSN: 890-70-9127

Phone: 521-985-6118

Address: 4623 Elm Ln, Los Angeles, CA 81746

MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 10/20/2019

Treating Physician: Dr. Jones

CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 10/20/2019.

DIAGNOSIS

Primary: Back Strain

Secondary: Soft Tissue Damage

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

TREATMENT PLAN

Immediate: Surgery

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: 9 weeks

PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Martin, MD

License: 152454

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