

MEDICAL REPORT

Report Date: 11/28/2019

Claim: CLM-AU0008

PATIENT INFORMATION

Name: Elizabeth Anderson
SSN: 443-18-4115
Address: 5215 Elm Blvd, Atlanta, GA 13612

DOB: 01/21/1992
Phone: 797-396-1268

MEDICAL FACILITY

Facility: City Medical Center
Date of Service: 11/28/2019

Treating Physician: Dr. Gonzalez

CHIEF COMPLAINT

Patient presents with whiplash following motor vehicle accident on 11/28/2019.

DIAGNOSIS

Primary: Whiplash
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: 8 weeks

PROGNOSIS

Excellent if patient follows prescribed treatment plan.

Physician: Dr. Gonzalez, MD
License: 567840
Date: 11/28/2019