

MEDICAL REPORT

Report Date: 11/24/2019

Claim: CLM-HO0039

PATIENT INFORMATION

Name: Robert Williams
SSN: 958-19-1243
Address: 2500 Maple Ln, Phoenix, AZ 73237

DOB: 01/05/1984
Phone: 361-761-7370

MEDICAL FACILITY

Facility: City Medical Center
Date of Service: 11/24/2019

Treating Physician: Dr. Miller

CHIEF COMPLAINT

Patient presents with laceration following motor vehicle accident on 11/24/2019.

DIAGNOSIS

Primary: Laceration
Secondary: Contusions
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: 11 weeks

PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Davis, MD
License: 467445
Date: 11/24/2019