

MEDICAL REPORT

Report Date: 11/22/2019

Claim: CLM-HO0212

PATIENT INFORMATION

Name: Christopher Rodriguez
SSN: 915-52-2779
DOB: 08/12/1962
Phone: 570-225-7715
Address: 9449 Washington Dr, New York, NY 43899

MEDICAL FACILITY

Facility: Memorial Hospital
Date of Service: 11/21/2019
Treating Physician: Dr. Anderson

CHIEF COMPLAINT

Patient presents with fractured rib following motor vehicle accident on 11/21/2019.

DIAGNOSIS

Primary: Fractured Rib
Secondary: Abrasions
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: 9 weeks

PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Davis, MD
License: 399324
Date: 11/22/2019