

MEDICAL REPORT

Report Date: 11/29/2019

Claim: CLM-HO0097

PATIENT INFORMATION

Name: Barbara Rodriguez
SSN: 225-71-3878
Address: 2831 Pine St, New York, NY 72744
DOB: 12/09/1980
Phone: 793-826-1083

MEDICAL FACILITY

Facility: City Medical Center
Date of Service: 11/27/2019
Treating Physician: Dr. Williams

CHIEF COMPLAINT

Patient presents with whiplash following motor vehicle accident on 11/27/2019.

DIAGNOSIS

Primary: Whiplash
Secondary: Soft Tissue Damage
ICD-10 Codes: S13.4XXA, M62.830

TREATMENT PLAN

Immediate: Orthopedic Specialist
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: 5 weeks

PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Garcia, MD
License: 762404
Date: 11/29/2019