

MEDICAL REPORT

Report Date: 12/30/2019

Claim: CLM-HO0245

PATIENT INFORMATION

Name: Robert Jackson

DOB: 02/03/1972

SSN: 806-26-5272

Phone: 283-328-3511

Address: 8826 Washington Ct, New York, NY 24046

MEDICAL FACILITY

Facility: Regional Emergency Care

Date of Service: 12/26/2019

Treating Physician: Dr. Moore

CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 12/26/2019.

DIAGNOSIS

Primary: Concussion

Secondary: Soft Tissue Damage

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

TREATMENT PLAN

Immediate: Urgent Care

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: 7 weeks

PROGNOSIS

Excellent if patient follows prescribed treatment plan.

Physician: Dr. Taylor, MD

License: 861270

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