

MEDICAL REPORT

Report Date: 12/07/2019

Claim: CLM-HO0182

PATIENT INFORMATION

Name: Karen Miller
SSN: 446-99-2197
Address: 3070 Washington Blvd, Atlanta, GA 66571

DOB: 07/05/1963
Phone: 353-299-5479

MEDICAL FACILITY

Facility: Regional Emergency Care
Date of Service: 12/06/2019

Treating Physician: Dr. Martin

CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 12/06/2019.

DIAGNOSIS

Primary: Concussion
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: 7 weeks

PROGNOSIS

Excellent if patient follows prescribed treatment plan.

Physician: Dr. Davis, MD
License: 177551
Date: 12/07/2019