

MEDICAL REPORT

Report Date: 11/13/2019

Claim: CLM-AU0172

PATIENT INFORMATION

Name: Jessica Rodriguez

DOB: 08/05/1987

SSN: 325-86-6904

Phone: 770-386-1077

Address: 4069 Washington Ct, Miami, FL 66918

MEDICAL FACILITY

Facility: Regional Emergency Care

Date of Service: 11/12/2019

Treating Physician: Dr. Hernandez

CHIEF COMPLAINT

Patient presents with whiplash following motor vehicle accident on 11/12/2019.

DIAGNOSIS

Primary: Whiplash

Secondary: Muscle Strain

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: 4 weeks

PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Jones, MD

License: 120291

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