

MEDICAL REPORT

Report Date: 07/28/2019

Claim: CLM-HO0236

PATIENT INFORMATION

Name: James Rodriguez

DOB: 10/17/1957

SSN: 149-59-9456

Phone: 538-863-3018

Address: 5605 Cedar Ln, Los Angeles, CA 91507

MEDICAL FACILITY

Facility: County General Medical Center

Date of Service: 07/25/2019

Treating Physician: Dr. Hernandez

CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 07/25/2019.

DIAGNOSIS

Primary: Back Strain

Secondary: Soft Tissue Damage

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

TREATMENT PLAN

Immediate: Surgery

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: 11 weeks

PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Williams, MD

License: 744696

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