

MEDICAL REPORT

Report Date: 12/07/2019

Claim: CLM-HO0182

PATIENT INFORMATION

Name: Karen Miller

DOB: 07/05/1963

SSN: 446-99-2197

Phone: 353-299-5479

Address: 3070 Washington Blvd, Atlanta, GA 66571

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

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