

# MEDICAL REPORT

Report Date: 12/01/2019

Claim: CLM-AU0128

## PATIENT INFORMATION

Name: Patricia Williams

DOB: 08/17/1987

SSN: 527-90-8133

Phone: 942-889-4976

Address: 1104 Maple St, Miami, FL 31018

## MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 12/01/2019

Treating Physician: Dr. Williams

## CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 12/01/2019.

## DIAGNOSIS

Primary: Concussion

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: 9 weeks

## PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Anderson, MD

License: 835763

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