

MEDICAL REPORT

Report Date: 12/26/2019

Claim: CLM-HO0058

PATIENT INFORMATION

Name: Joseph Brown
SSN: 819-38-2465
DOB: 03/25/1990
Phone: 218-219-3057
Address: 5270 Washington Dr, Chicago, IL 18103

MEDICAL FACILITY

Facility: Memorial Hospital
Date of Service: 12/21/2019
Treating Physician: Dr. Brown

CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 12/21/2019.

DIAGNOSIS

Primary: Back Strain
Secondary: Muscle Strain
ICD-10 Codes: S13.4XXA, M62.830

TREATMENT PLAN

Immediate: Urgent Care
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. Rodriguez, MD
License: 548264
Date: 12/26/2019