

# MEDICAL REPORT

Report Date: 08/21/2019

Claim: CLM-HO0057

## PATIENT INFORMATION

Name: Mary Anderson  
SSN: 730-32-6697  
Address: 2859 Maple Ct, Los Angeles, CA 65249

DOB: 12/04/1981  
Phone: 441-703-9571

## MEDICAL FACILITY

Facility: Regional Emergency Care  
Date of Service: 08/17/2019

Treating Physician: Dr. Martin

## CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 08/17/2019.

## DIAGNOSIS

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

## TREATMENT PLAN

Immediate: Orthopedic Specialist  
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: 6 weeks

## PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Martinez, MD  
License: 112582  
Date: 08/21/2019