

# MEDICAL REPORT

Report Date: 11/29/2019

Claim: CLM-HO0097

## PATIENT INFORMATION

Name: Barbara Rodriguez  
SSN: 225-71-3878  
Address: 2831 Pine St, New York, NY 72744

DOB: 12/09/1980  
Phone: 793-826-1083

## MEDICAL FACILITY

Facility: City Medical Center  
Date of Service: 11/27/2019

Treating Physician: Dr. Williams

## CHIEF COMPLAINT

Patient presents with whiplash following motor vehicle accident on 11/27/2019.

## DIAGNOSIS

Primary: Whiplash  
Secondary: Soft Tissue Damage  
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: 5 weeks

## PROGNOSIS

Good with proper treatment and physical therapy compliance.

Physician: Dr. Garcia, MD  
License: 762404  
Date: 11/29/2019