

MEDICAL REPORT

Report Date: 08/27/2019

Claim: CLM-HO0087

PATIENT INFORMATION

Name: Michael Smith

DOB: 02/26/1955

SSN: 548-39-7593

Phone: 983-513-5132

Address: 3822 Main Ave, Atlanta, GA 52087

MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 08/24/2019

Treating Physician: Dr. Jackson

CHIEF COMPLAINT

Patient presents with concussion following motor vehicle accident on 08/24/2019.

DIAGNOSIS

Primary: Concussion

Secondary: Contusions

ICD-10 Codes: S13.4XXA, M62.830

TREATMENT PLAN

Immediate: Physical Therapy

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

Fair - may require extended treatment period.

Physician: Dr. Lopez, MD

License: 527936

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