

MEDICAL REPORT

Report Date: 10/07/2019

Claim: CLM-AU0224

PATIENT INFORMATION

Name: Mary Hernandez

DOB: 01/04/1990

SSN: 179-28-5937

Phone: 354-357-3108

Address: 9795 Maple Dr, Houston, TX 54820

MEDICAL FACILITY

Facility: City Medical Center

Date of Service: 10/03/2019

Treating Physician: Dr. Hernandez

CHIEF COMPLAINT

Patient presents with fractured rib following motor vehicle accident on 10/03/2019.

DIAGNOSIS

Primary: Fractured Rib

Secondary: Contusions

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: 8 weeks

PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Jones, MD

License: 812727

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