

MEDICAL REPORT

Report Date: 12/30/2019

Claim: CLM-HO0129

PATIENT INFORMATION

Name: Elizabeth Brown

DOB: 04/02/1968

SSN: 186-66-5479

Phone: 954-397-9488

Address: 6870 Oak Blvd, Los Angeles, CA 18961

MEDICAL FACILITY

Facility: Regional Emergency Care

Date of Service: 12/28/2019

Treating Physician: Dr. Davis

CHIEF COMPLAINT

Patient presents with back strain following motor vehicle accident on 12/28/2019.

DIAGNOSIS

Primary: Back Strain

Secondary: Muscle Strain

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

TREATMENT PLAN

Immediate: Emergency Room

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: 11 weeks

PROGNOSIS

Fair - may require extended treatment period.

Physician: Dr. Anderson, MD

License: 977982

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