

# MEDICAL REPORT

Report Date: 01/13/2020

Claim: CLM-AU0181

## PATIENT INFORMATION

Name: William Martinez

DOB: 06/21/1991

SSN: 793-56-2489

Phone: 702-595-8021

Address: 2632 Cedar Ln, Miami, FL 27502

## MEDICAL FACILITY

Facility: Memorial Hospital

Date of Service: 01/08/2020

Treating Physician: Dr. Williams

## CHIEF COMPLAINT

Patient presents with whiplash following motor vehicle accident on 01/08/2020.

## DIAGNOSIS

Primary: Whiplash

Secondary: Muscle Strain

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

Good with proper treatment and physical therapy compliance.

Physician: Dr. Jackson, MD

License: 858019

Date: 01/13/2020