

**Narrative Summary**

On August 30, 2017, at 01:08 p.m., XYZ was the restrained driver of a 2011 Accent. She was traveling northbound on Parkwood Boulevard in the right hand lane. At the same time, XYZ was driving a 2014 Ford southbound on Parkwood Boulevard intending on turned eastbound on Lebanon Road. At one point, Ms. XYZ failed to yield turning left and collided with Ms. XYZ's vehicle.

On September 2, 2017, Ms. XYZ was examined by XYZ, M.D., at the Emergency Room of XYZ Urgent Care for the complaints of having headache, pain in her left arm, left leg, nausea, and fatigue due to the motor vehicle collision that occurred on August 30, 2017. She reported her pain level as 5/10. On examination, she had bruising in her left hand and left hip. An X-ray of left hand was obtained and reviewed. She was diagnosed with concussion, strain of her neck, and contusion of her left hand. Robaxin and Naproxen were prescribed. She was recommended to follow-up on September 4, 2017.

On September 4, 2017, Ms. XYZ was examined by XYZ, PA-C., at XYZ Urgent Care for the complaints of having headache, pain in her left arm, neck, and left leg. She reported her pain level as 5/10. On examination, she had limited range of motion in her neck, tenderness in her cervical and thoracic muscles. She was diagnosed with concussion, strain of her neck, and contusion of her left hand. Robaxin and Naproxen were prescribed. Heat application was recommended for her neck and back. She was advised to follow-up in five days.

On September 5, 2017, Ms. XYZ was examined by XYZ D.O., at XYZ Hospital for the complaints of having concussion sustained due to the motor vehicle collision that occurred on August 30, 2017. She also had headache, fatigue, difficulty concentrating, mentally foggy, feeling slowed down, frequent crying, irritability, and drowsiness. She was diagnosed with post-concussion syndrome. A CT of her head was recommended. She was advised to follow-up in two weeks.

On September 6, 2017, a CT scan of Ms. XYZ's thoracic spine was obtained by XYZ, M.D., at XYZ Diagnostic Imaging. The study revealed no fractures or sequelae of acute traumatic injury about the thoracic spine.

On September 19, 2017, Ms. XYZ was examined by XYZ FNP-C., at XYZ Hospital for the complaints of having concussion, headache, fatigue, irritability, and brain fog. She was diagnosed with concussion, post-traumatic headache, fatigue, irritability, and brain fog. Magnesium, Riboflavin, and Vayacog were prescribed. She was recommended to follow-up in four weeks.

On September 25, 2017, an MRI of Ms. XYZ's brain was obtained and reviewed by XYZ, M.D., at XYZ Medical Imaging.

On October 3, 2017, Ms. XYZ was examined by XYZ M.D., at XYZ Hospital for the complaints of having headaches, cognitive and emotional changes, and neck/back pain. She also had forgetfulness, decreased concentration, and changes in mood, and reduced mental performance at work, increased irritability with angry outbursts, and crying spells. Her PHQ-9 depression screen score was 8 which indicated risk for depression and Epworth sleepiness scale score was 10 which indicated risk for sleep disorder. She was diagnosed with concussion, post-traumatic headache, post-concussional syndrome, acute pain due to trauma, adjustment disorder with anxiety, sprain of her cervical spine, and sprain of her thoracic spine.

*Patient Name*

*DOB*

On October 17, 2017, Ms. XYZ was examined by XYZ, M.D., at XYZ Hospital for the complaints of having concussion, headache, and fatigue. She was diagnosed with concussion, post-traumatic headache, fatigue, irritability, and brain fog. Magnesium, Riboflavin, and Vayacog were prescribed. She was recommended to follow-up in six weeks.

On December 3, 2017, Ms. XYZ was examined by XYZ, PA-C., at XYZ Hospital for the complaints of having concussion, headache, and fatigue sustained due to the motor vehicle collision that occurred August 30, 2017. She was diagnosed with concussion, post-traumatic headache, fatigue, irritability, and brain fog. She was recommended to follow-up as needed.

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