

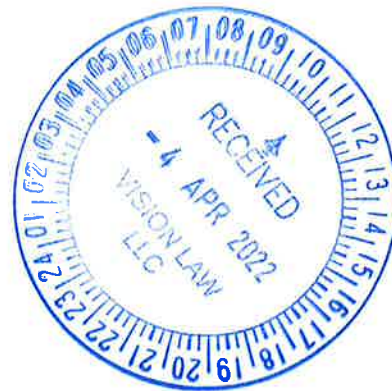


**Ng Teng Fong
General Hospital**

Your Ref : AW1-jgc-ins-V1-116970-2022(jw)
Our Ref : 367700

DATE : 30/3/2022

VISION LAW LLC
133 NEW BRIDGE ROAD
#18-01/02
CHINATOWN POINT
Singapore 059413



Dear Sir/Mdm,

We have enclosed a copy of Ordinary Medical Report, as requested.

For further assistance, please contact us at 6716 6750 (Mon - Fri: 8.30am - 5.30pm, Sat: 8.30am - 12.30pm) or to email to JHC_Medical_Records@nuhs.edu.sg.

Thank you.

Yours Faithfully,

Chua Chin Chye
Medical Records Office
Ng Teng Fong General Hospital and Jurong Community Hospital

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Ng Teng Fong General Hospital

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MEMBERS OF THE NATIONAL UNIVERSITY HEALTH SYSTEM

National University Hospital • Ng Teng Fong General Hospital • Alexandra Hospital • Jurong Community Hospital • National University Polyclinics
• National University Cancer Institute, Singapore • National University Heart Centre, Singapore • National University Centre for Oral Health, Singapore
• NUS Yong Loo Lin School of Medicine • NUS Alice Lee Centre for Nursing Studies • NUS Faculty of Dentistry • NUS Saw Swee Hock School of Public Health

Your Ref : AW1-jgv-ins-V1-116970-2022(jw)
Our Ref : 367700

21 March 2022

Vision Law LLC
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413

Dear Sir/Madam,

On behalf of Head, Emergency Medicine Department, Ng Teng Fong General Hospital



Name : LAW SIAH YONG
NRIC No. : S8376141E

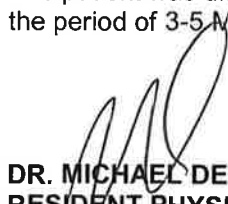
The above named patient was seen by Dr. Michelle Alcantara on 2 March 2022 at the Emergency Department of Ng Teng Fong General Hospital.

The patient came to the Emergency Department after an alleged road traffic accident. He was the driver of a car that was stationary when a taxi collided with his vehicle from the rear. He was wearing his seatbelt and was pushed backward. He complained of pain on his neck, lower back and right side of the chest. He did not have head injury, limb weakness or numbness, shortness of breath, abdominal pain, nausea or vomiting.

On physical examination, the patient was ambulatory, conscious and coherent. He had no neurologic deficits. There was no cephalohaematoma or posterior cervical midline tenderness. There was tenderness over the right sternocleidomastoid muscle. The neck had full range of motion. Tenderness was elicited over the 5th and 6th rib RMCL. There was no seatbelt sign. Tenderness was present over the L4 and L5 vertebrae. The pelvis was stable. The rest of the physical examination findings were normal.

X-rays of the chest, cervical spine and lumbar spine revealed no fracture or dislocation. Impressions at the time of physical examination were chest wall contusion, neck strain and back strain.

The patient was discharged with oral and topical analgesics. Out-patient medical leave was granted for the period of 3-5 March 2022.



DR. MICHAEL DE DIOS
RESIDENT PHYSICIAN
EMERGENCY MEDICINE DEPARTMENT
NG TENG FONG GENERAL HOSPITAL
MCR: 60737A