

# CLINICAL MEDICAL REPORT

## Lumbar Spine Imaging Request

Patient Name:	Robert James Wilson
Date of Birth:	March 15, 1965 (59 years old)
MRN:	MR-458729
Date of Visit:	November 03, 2025
Requesting Physician:	Dr. Michael Anderson, MD
Specialty:	Orthopedic Surgery

### CHIEF COMPLAINT

Chronic lower back pain with radicular symptoms to left lower extremity

### HISTORY OF PRESENT ILLNESS

Patient is a 59-year-old male presenting with 8-month history of chronic lower back pain with radiation to the left leg. Patient reports pain worse with bending and prolonged sitting. Pain is 7/10 in severity. Has tried conservative therapy including:

**Conservative Treatment Completed (8 weeks documented):**

- Physical Therapy: 2x/week for 6 weeks (completed October 2025) - Exercises, stretching, core strengthening
- Chiropractic Care: 1x/week for 4 weeks (completed September 2025) - Spinal manipulation
- Home Exercise Program: Continuing daily - stretching, walking
- Anti-inflammatory medication: Ibuprofen 600mg twice daily
- Activity modification: Avoiding heavy lifting

Despite conservative therapy lasting 8 weeks (exceeding policy requirement of 6 weeks), patient continues to experience persistent pain and reports pain has **WORSENERD** during past 2 weeks. Patient now has onset of left foot weakness and numbness in last 3 days. Given worsening symptoms and neurologic changes, MRI imaging is medically necessary to rule out nerve root compression or disc herniation.

### PHYSICAL EXAMINATION

Vital Signs:	BP 138/85, HR 78, RR 16, Temp 98.6°F
General:	59-year-old male, alert and oriented

<b>Neurologic:</b>	Left lower extremity weakness (4/5), diminished sensation L4-L5 distribution
<b>Reflexes:</b>	Diminished left knee reflex, normal right
<b>SLR Test:</b>	Positive left, reproduces pain with radiation
<b>Motor:</b>	Left foot dorsiflexion weakness, unable to walk on tiptoes left side

## IMAGING INDICATION

### **MRI Lumbar Spine is medically necessary to evaluate:**

- Chronic lower back pain with failed conservative therapy (8 weeks completed)
- New onset left lower extremity neurologic symptoms (weakness, numbness)
- Rule out nerve root compression, disc herniation, or spinal stenosis
- Worsening symptoms despite compliance with conservative treatment
- Physical exam findings consistent with L4-L5 radiculopathy

## ASSESSMENT AND PLAN

**Diagnosis:** Chronic lower back pain with left-sided radiculopathy, failed conservative therapy

### **Plan:**

1. MRI Lumbar Spine with and without contrast
2. If imaging shows significant pathology, consider spine specialist referral
3. May need epidural steroid injection or surgical evaluation if confirmed nerve compression

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