

# TEST RESULTS

## TEST RESULTS AND DIAGNOSTIC REPORTS

Patient: Sarah Marie Johnson  
DOB: March 15, 1985  
MRN: 789456123

### MRI REPORT - LUMBAR SPINE

<b>Study Date:</b>	January 15, 2023
<b>Patient Name:</b>	Sarah Marie Johnson
<b>DOB:</b>	March 15, 1985
<b>MRN:</b>	789456123
<b>Referring Physician:</b>	Dr. Michael Chen, MD
<b>Exam Type:</b>	MRI Lumbar Spine without contrast

#### **CLINICAL HISTORY:**

39-year-old female with severe lower back pain and left leg radiculopathy. Symptoms began January 2023. Rule out disc herniation and nerve root compression.

#### **TECHNIQUE:**

Multiplanar, multisequence MRI of the lumbar spine was performed on a 1.5 Tesla scanner. Sagittal T1, T2, and STIR images, and axial T1 and T2 images were obtained.

#### **FINDINGS:**

L4-L5: There is a large central and left paracentral disc herniation with significant compression of the thecal sac and left L5 nerve root. The disc material extends approximately 8mm posteriorly into the spinal canal. Moderate to severe spinal canal stenosis is present. The left neural foramen is significantly narrowed.

L5-S1: Mild disc bulging without significant neural compression. No herniation.

L3-L4: Normal disc height and signal. No herniation or stenosis.

L2-L3: Normal disc height and signal. No herniation or stenosis.

L1-L2: Normal disc height and signal. No herniation or stenosis.

#### **IMPRESSION:**

1. Large central and left paracentral disc herniation at L4-L5 with significant compression of the thecal sac and left L5 nerve root.
2. Moderate to severe spinal canal stenosis at L4-L5.
3. Mild disc bulging at L5-S1 without significant neural compression.

Radiologist: Dr. Patricia Williams, MD  
 Board Certified - Diagnostic Radiology  
 License: CA MD987654

## **PHYSICAL THERAPY FUNCTIONAL CAPACITY EVALUATION**

**Evaluation Date:** February 10, 2023  
**Patient Name:** Sarah Marie Johnson  
**DOB:** March 15, 1985  
**Evaluator:** Dr. Jennifer Martinez, PT, DPT  
**Facility:** Oakland Physical Therapy Center  
**Address:** 456 Therapy Way, Oakland, CA 94607

### **REASON FOR EVALUATION:**

Functional capacity evaluation to assess work-related physical abilities and limitations following lumbar disc herniation and radiculopathy.

### **FUNCTIONAL TESTING RESULTS:**

Activity	Result	Limitation
Standing Tolerance	15 minutes maximum	Severe pain after 15 min
Sitting Tolerance	30 minutes maximum	Severe pain after 30 min
Walking Distance	100 feet	Requires rest due to pain
Lifting (Floor to Waist)	5 pounds maximum	Cannot lift >5 lbs
Lifting (Waist to Shoulder)	3 pounds maximum	Severe pain with lifting
Carrying	5 pounds maximum	Limited by back pain
Climbing Stairs	Unable	Severe pain prevents climbing
Bending/Stooping	Unable	Severe pain prevents bending
Kneeling	Unable	Cannot assume position
Crouching	Unable	Cannot assume position
Crawling	Unable	Cannot assume position

## **SUMMARY AND RECOMMENDATIONS:**

Patient demonstrates significant functional limitations consistent with lumbar disc herniation and radiculopathy. Based on testing results, patient is limited to sedentary work capacity with the following restrictions:

- Maximum lifting: 5 pounds occasionally
- Standing: 15 minutes at a time, 2 hours total per 8-hour day
- Sitting: 30 minutes at a time, 4 hours total per 8-hour day
- Walking: 100 feet at a time, requires frequent rest periods
- No climbing, balancing, stooping, kneeling, crouching, or crawling
- Requires ability to change positions frequently
- Should avoid exposure to vibration and extreme cold

These limitations are expected to persist for at least 12 months.

Signature: \_\_\_\_\_

Jennifer Martinez, PT, DPT

License: CA PT456789