

EHR Report

Generated: 2025-11-26 05:47:58

Clinical Report: Likely Diagnosis

Patient: Michael Rodriguez (MRN: 00291837)
Encounter Date: 2025-05-01
Chief Complaint: Chronic lower back pain

1. Documented Diagnosis (from EHR Assessment)
Chronic mechanical low back pain

2. Clinical Rationale and Supporting Data
Based on the provided EHR data and aligned with current literature, the diagnosis of chronic mechanical low back pain is strongly supported by the following:

* **Symptom Presentation (EHR):** The patient reports chronic lower back pain for 3 months, which is exacerbated by sitting. There is no history of trauma, numbness, or tingling, reducing the likelihood of acute injury or radiculopathy.

* **Physical Examination Findings (EHR):** Musculoskeletal exam reveals tenderness over the L4-L5 region and limited forward flexion. These findings are consistent with the `literature_example.pdf`, which states, "Patients with chronic mechanical low back pain often present with tenderness over the lumbar region, limited forward flexion, and discomfort when sitting for extended periods."

* **Absence of Red Flags (EHR):** The history of present illness does not describe 'red flag' symptoms such as fever, unexplained weight loss, nocturnal pain, bowel/bladder dysfunction, or progressive neurological deficits, which would suggest a more serious underlying condition.

* **Comorbidities (EHR and Literature):** The patient's past medical history includes hypertension and hyperlipidemia. The `literature_example.pdf` notes that "Comorbidities such as hypertension and hyperlipidemia are common and should be considered in the management plan" for CLBP patients.

3. Conclusion
The patient's clinical presentation, physical exam findings, and documented assessment in the EHR are highly consistent with chronic mechanical low back pain, further reinforced by the general principles outlined in the provided literature.