

# EHR Report

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## \*\*Clinical Report: Assessment of Chronic Lower Back Pain\*\*

### \*\*Patient Information:\*\*

\* \*\*Name:\*\* Michael Rodriguez  
\* \*\*MRN:\*\* 00291837  
\* \*\*DOB:\*\* 1975-04-22 (Age: 49 years at encounter date)  
\* \*\*Sex:\*\* Male  
\* \*\*Encounter Date:\*\* 2025-05-01 (Outpatient with Dr. Aisha Patel)

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### \*\*Chief Complaint:\*\*

Chronic lower back pain for 3 months.

### \*\*History of Present Illness:\*\*

Mr. Rodriguez reports lower back pain for 3 months, described as worse when sitting. There is no history of trauma, and he denies numbness or tingling in the extremities.

### \*\*Relevant Past Medical History:\*\*

\* Hypertension  
\* Hyperlipidemia

### \*\*Current Medications:\*\*

\* Amlodipine 5mg daily  
\* Atorvastatin 20mg daily

### \*\*Physical Exam Findings (Musculoskeletal):\*\*

\* Tenderness noted over the L4-L5 vertebral level.  
\* Limited forward flexion of the spine.

### \*\*Vital Signs:\*\*

\* BP: 132/84 mmHg  
\* HR: 78 bpm  
\* Temp: 36.7 C  
\* SpO2: 98%

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### \*\*Clinician's Assessment (from EHR):\*\*

Chronic mechanical low back pain.

### \*\*Likely Diagnosis (Based on EHR Assessment):\*\*

The documented assessment in the EHR explicitly states "Chronic mechanical low back pain." This reflects the clinician's conclusion based on the presenting symptoms, duration, absence of trauma, lack of neurological deficits (no numbness/tingling), and physical exam findings (localized tenderness, limited flexion).

### \*\*Clinical Interpretation & Reasoning:\*\*

The history of pain for 3 months without trauma, coupled with worsening pain when sitting, is consistent with mechanical back pain. The physical exam finding of tenderness at L4-L5 and limited forward flexion further supports a musculoskeletal origin. The absence of "red flag" symptoms such as numbness, tingling, or bowel/bladder changes, as explicitly noted in the HPI, reduces the immediate concern for radiculopathy or other more serious spinal pathology at this time, aligning with the "mechanical" classification.

### \*\*Current Plan:\*\*

\* Referral for physiotherapy.  
\* Initiation of core strengthening exercises.  
\* NSAIDs prescribed as needed for pain.  
\* Follow-up appointment scheduled in 4 weeks.

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\*\*Disclaimer:\*\* This report is generated from the provided EHR data and is intended for clinical decision support by licensed healthcare professionals. It does not constitute a definitive diagnosis or medical advice. The content is an interpretation of the available information and should be integrated with comprehensive clinical judgment.