

EHR Report

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Clinical Report: Documented Assessment and Supporting Data

Patient: Michael Rodriguez (MRN: 00291837, DOB: 1975-04-22, Male)
Encounter Date: 2025-05-01 (Outpatient)
Clinician: Dr. Aisha Patel

1. Documented Clinical Assessment (from EHR)
The EHR explicitly documents the clinician's assessment as:
* **Chronic mechanical low back pain.**

2. Supporting Clinical Data (from EHR)
The following objective data from the EHR aligns with and supports the documented assessment:

* **Chief Complaint:** Chronic lower back pain.
* **History of Present Illness:** Pain for 3 months, described as worse when sitting. Notably, the patient reports "no trauma, no numbness/tingling," which helps to rule out immediate concerning etiologies such as acute injury or radiculopathy for initial presentation.
* **Musculoskeletal Exam:** Findings include "tenderness over L4-L5" and "limited forward flexion." These are common objective signs associated with mechanical low back pain.
* **Vitals:** Within normal limits (BP: 132/84, HR: 78, Temp: 36.7C, SpO2: 98%), not suggestive of acute systemic illness contributing to pain.
* **Past Medical History/Medications:** Hypertension and Hyperlipidemia are noted, managed with Amlodipine and Atorvastatin, but do not directly relate to the back pain etiology.

3. Clinical Interpretation & Rationale
The duration of 3 months categorizes the pain as chronic. The reported pain characteristics (worse with sitting), the absence of neurological symptoms (no numbness/tingling), and the physical exam findings (localized tenderness, limited flexion) are all consistent with a mechanical origin rather than inflammatory, infective, or radicular causes, given the current information. The absence of trauma also points towards a more gradual, mechanical onset.

4. Plan of Care (from EHR)
The documented plan of care further aligns with the assessment of chronic mechanical low back pain:

* Physiotherapy referral
* Core strengthening exercises
* NSAIDs PRN
* Follow up in 4 weeks

Disclaimer: This report summarizes and interprets the provided EHR data. The assessment listed is directly from the clinician's documentation in the EHR. This tool does not generate independent diagnoses.