**Medical Re-Evaluation**

Patient Name: Kendra Marshall

Dt. of Exam: 08/13/2019

1st Exam Dt.: 04/30/2019

Dt. of Injury: 03/22/2019

Notes^ low back pain.

**Procedures performed:**

6/18/19 - CTPI#1

**Chief Complaint:**

The patient complains of neck pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Neck pain is associated with numbness and tingling. Neck pain is worsened with sitting, standing and lying down.

The patient complains of mid back pain that is 7/10, with 10 being the worst, which is dull and achy in nature. Mid-back pain is worsened with lying down, movement activities and bending.

The patient complains of lower back pain that is 8/10, with 10 being the worst, which is sharp in nature. Lower back pain is associated with numbness and tingling Lower back pain is worsened with sitting, standing, lying down, movement activities and climbing stairs. The patient presents today for followup of low back pain, medication refills, and follow up of LESI. She is status post MVA on 03/22/2019. She is still having some low back pain and having appropriate tenderness from the procedure in that location. She underwent LESI just 3 days ago on 08/10/2019. She has been undergoing chiropractic therapy with some benefit. She states the baclofen did not help much in terms of eradicating the pain.

**REVIEW OF SYSTEMS:**  The patient denies seizures, chest pain, shortness of breath, jaw pain, abdominal pain, fevers, night sweats, diarrhea, blood in urine, bowel/bladder incontinence, double vision, hearing loss, recent weight loss, episodic lightheadedness and rashes.

**PAST MEDICAL HISTORY:**  Noncontributory.

**PAST SURGICAL / HOSPITALIZATION HISTORY:**  Noncontributory.

**MEDICATIONS:**  None.

**ALLERGIES:**  No known drug allergies.

**Physical Examination:**

**Neurological Exam:** Patient is alert and cooperative and responding appropriately. Cranial nerves II-XII grossly intact.

**Deep Tendon Reflexes:** Are 2+ and equal.

**Sensory Examination:** .

**Manual Muscle Strength Testing:** Testing is 5/5 normal.

**Cervical Spine exam:** Cervical spine examination reveals tenderness upon palpation at C2-8 levels bilaterally with muscle spasm present. ROM is as follows: extension was 10 and is 10 degrees; forward flexion was 30 and is 30 degrees; right rotation was 10 and is 10 degrees; left rotation was 10 and is 10 degrees; right lateral flexion was 10 and is 10 degrees and left lateral flexion was 10 and is 10 degrees.

**Thoracic Spine Examination:** Reveals tenderness upon palpation at T1-T12 levels bilaterally with muscle spasm present.

**Lumbar Spine Examination:** Lumbar spine examination reveals tenderness upon palpation atL1-S1 levels bilaterally with muscle spasm present. ROM is as follows: extension was 10 and is 10 degrees; forward flexion was 30 and is 30 degrees; right rotation was 10 and is 10 degrees; left rotation was 10 and is 10 degrees; right lateral flexion was 10 and is 10 degrees and left lateral flexion was 10 and is 10 degrees.

**GAIT:** Normal.

**Diagnostic Studies:**

5/23/2019 - MRI of the Cervical spine reveals bulge at C4-5, C5-6

5/23/2019 - MRI of the Thoracic spine is normal.

5/23/2019 - MRI of the Lumbar spine reveals bulge at L3-4 and HNP at L4-5, L5-S1

The above diagnostic studies were reviewed.

**Diagnosis:**

Cervical disc bulge at C4-5, C5-6.

Lumbar disc bulge at L3-4.

Lumbar disc herniation at L4-5, L5-S1.

Cervical Muscle Sprain/Strain.

Possible Cervical Disc Herniation.

Possible Cervical Radiculopathy Vs. Plexopathy Vs. Entrapment Syndrome.

Thoracic Muscle Sprain/Strain.

Lumbar Muscle sprain/strain.

Possible Lumbar disc herniation.

Possible Lumbar radiculopathy vs. entrapment syndrome vs. polyradiculopathy.

Sacroiliitis.

**Plan:**

Discontinued baclofen.

Added meloxicam 15 mg daily p.r.n. today to help with pain.

Medication refills provided.

Reassured her that it will take 10 days for the procedure to take full effect.

Follow up in 4 weeks.

med refills today, added meloxicam, discontinued baclofen, fu in 4 weeks.

**Medications:**

Refilled her medications to include:

Percocet 7.5/325 mg one tab bid prn for pain dispense #60

Gabapentin 300 mg one tablet qhs p.r.n. dispense #30.

Added meloxicam 15 mg daily p.r.n. #30

**Follow-up:** 4 weeks.



Gurbir Johal, M.D.