**Medical Re-Evaluation**

Patient Name: Jerilynn Zelenak

Dt. of Exam: 08/16/2019

1st Exam Dt.: 02/01/2019

**Procedures performed:**

2/23/19 - Caudal w/cath#1

3/23/19 - Caudal w/cath#2

**Chief Complaint:**

The patient complains of lower back pain that is 8/10, with 10 being the worst, which is sharp in nature. The lower back pain radiates to bilateral legs. Lower back pain is associated with numbness and tingling to the bilateral legs. Lower back pain is worsened with sitting, standing, lying down, movement activities and climbing stairs. The patient is here for follow up evaluation of low back pain and bilateral lower extremity pain. She has a history of failed back syndrome, and lumbar radiculopathy. He is having persistent low back pain radiating down to her lower extremities. She has been taking tramadol with benefit. She denies any constipation, dizziness, or any other side effects of medication. She is experiencing lower extremity pain/restless legs at night. This pain is interfering with sleep. She denies any claudication with walking. Her leg coloration is normal. The pain is interfering with sleep at night. She has been taking Soma without much benefit.

**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:**  Breast lesion, sinus infection, leg weakness, hypertension, urinary tract infection, blood in urine, tachycardia, left ankle osteomyelitis, RSD, cystocele, rectocele,.

**PAST SURGICAL / HOSPITALIZATION HISTORY:**  In 2000, fractured right patella x3, 2002-left breast benign tumor/cyst, 2007-high-grade spondylolisthesis, L3-4 HNP, 2013 July, Hamstring tendon attachment tear at left foot hammertoe repair, bunionectomy.

**MEDICATIONS:**  Metformin 1000 mg daily, lisinopril 10 mg daily, atenolol 50 mg daily, Baby aspirin 81 mg daily, CoQ10 200 mg daily, cranberry capsule two daily, tramadol 100 mg prn.

**ALLERGIES:**  Cannot take Lyrica because of nightmares.

**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.

**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:**

5/4/2018 - MRI of the Lumbar spine reveals Postsurgical changes related to L4 and LS laminectomy and posterior instrumented fusion again seen, with associated artifact som1awhat limiting evaluation. Multilevel degenerative changes noted, as described above. Though limited by artifact, findings most prominently result in lateral recess stenosis and what appears to be moderate to severe left greater than right foraminal narrowing at L5-S1. The foraminal narrowing may be mildly progressed since the prior study.

5/24/2018 - LE NCV/EMG Severe sensorimotor axonal polyneuropathy affecting bilateral lower extremities. Chronic bilateral L5, 51 radiculopathy which is likely suggestive of spinal stenosis at these levels..

The above diagnostic studies were reviewed.

**Diagnosis:**

Lumbar Postsurgical changes related to L4 and LS laminectomy and posterior instrumented fusion again seen, with associated artifact som1awhat limiting evaluation. Multilevel degenerative changes noted, as described above. Though limited by artifact, findings most prominently result in lateral recess stenosis and what appears to be moderate to severe left greater than right foraminal narrowing at L5-S1. The foraminal narrowing may be mildly progressed since the prior study..

**Plan:**

Med refills to include:

1. Tramadol 50 mg t.i.d. prn #180 tabs.

2. Samples of Horizant 600 mg b.i.d. for 5 days.

3. Follow up in 3 weeks.

Med refills to include:

1. Tramadol 50 mg t.i.d. prn #180 tabs.

2. Samples of Horizant 600 mg b.i.d. for 5 days.

Follow up in 4 weeks.

**Medications:**

Refills provided for:

Tramadol 50 mg take two tabs t.i.d. p.r.n. pain dispense #180 failed back syndrome.

Samples of Horizant 600 mg b.i.d. for 5 days.

**Follow-up:** 4 weeks



Gurbir Johal, M.D.