

**Conversation script:**

Doctor: "Hey Mr. Smith, I hear you've got some back pain and trouble walking. Can you tell me what's been going on?"

Patient: "Yeah, doc. It's been pretty bad. My lower back's been killing me for like 2 weeks, but it's really gotten worse in the last few days. Now I can barely walk."

Doctor: "I see. Where exactly is the pain? Lower back or higher up?"

Patient: "Mostly in the lower back, right in the middle. Started as a dull ache, but now it's sharp and constant, feels like stabbing."

Doctor: "Does the pain stay in your back or go down to your legs?"

Patient: "Mostly in my back, but now my legs feel weak. It's hard to walk without holding onto something."

Doctor: "And does the pain come and go, or is it always there?"

Patient: "It's there all the time now, last few days. Doesn't get better, no matter what I do."

Doctor: "Have you had a fever or chills?"

Patient: "Yeah, been getting fevers on and off for about a week. Thought I had the flu or something. I sweat a lot at night too."

Doctor: "Ok, and the weakness in your legs, when did that start?"

Patient: "A couple days ago. Before that, it was just pain, but now my legs feel heavy and I can't move them right."

Doctor: "Any numbness or tingling in your legs?"

Patient: "Yeah, my thighs and feet feel kinda numb. That started when my legs got weak."

Doctor: "What about your bladder? Any trouble urinating?"

Patient: "Yeah, hard to pee. I feel like I need to go, but nothing really comes out. Been like this for a day or two. Haven't had a bowel movement for 2 days either."

Doctor: "Ok, thanks for telling me. Have you had any injuries or falls recently?"

Patient: "No, nothing like that. Just started out of nowhere."

Doctor: "Ever had back pain like this before?"

Patient: "Nope, never this bad."

Doctor: "Any other health problems?"

Patient: "Just high BP. I take meds for it."

Doctor: "Which meds are you on?"

Patient: "Lisinopril, for the BP."

Doctor: "Ok. Any surgeries or hospital stays?"

Patient: "No surgeries. I was in the hospital a couple years ago for a skin infection, but that cleared up."

Doctor: "Infection? Tell me more."

Patient: "Yeah, I had a boil on my leg a while back. They gave me antibiotics and it went away. Actually, had another boil 2 weeks ago, but it healed up by itself."

Doctor: "Got it. Have you ever used IV drugs?"

Patient: [hesitates] "Yeah... used to do heroin, but been clean for 6 months now."

Doctor: "Good to hear you're clean. Thanks for being honest. Do you smoke or drink?"

Patient: "Still smoke, about a pack a day. Drink socially, a couple beers on weekends."

Doctor: "Ok. What do you do for work?"

Patient: "I'm a mechanic, but been off work for a couple weeks coz of the pain."

Doctor: "Alright, thanks for all the info, Mr. Smith. I'm gonna do a quick exam now and we'll run some tests to figure out what's going on."

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### **Examination:**

General Appearance: The patient appears unwell, sweating, and visibly uncomfortable due to the pain.

Vital Signs:

- Temperature: 38.5°C (fever)
- Heart rate: 105 bpm (tachycardia)
- Blood pressure: 130/85 mmHg
- Respiratory rate: 20/min
- Oxygen saturation: 98% on room air

Spine:

- **Inspection:** No obvious deformities or swelling.
- **Palpation:** Severe tenderness over the **lower thoracic and lumbar spine** (T10-L2).

Neurological Examination:

- **Power:**
  - Decreased strength in both lower extremities (3/5 bilaterally).
  - Upper extremities normal.
- **Sensation:**
  - Decreased sensation to light touch and pinprick in the **bilateral thighs and feet**.
  - No sensory loss in the upper extremities.
- **Reflexes:**
  - Patellar reflexes diminished bilaterally.
  - Absent ankle jerks.
- **Coordination:** Unable to perform heel-to-shin test due to weakness.
- **Gait:** Unable to walk unaided due to leg weakness.
- **Bladder:** The patient reports difficulty with urination; no bladder distention is noted, but this raises concern for **urinary retention**.

Other Findings:

- **Skin:** A healed scar from a recent boil on the left thigh is noted.
- No other systemic signs of infection (no rashes or joint swelling).

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## **Investigations**

1. **Blood Work:**
  - **White Blood Cell Count (WBC):** 16
  - **C-Reactive Protein (CRP):** 160
  - **Blood Cultures:** Pending
2. **Urinalysis:**
  - No evidence of urinary tract infection
3. **Imaging:**
  - **MRI of the spine:**
    - Reveals a **posterior epidural collection** at the **T12-L2** level with significant **compression of the spinal cord**.
    - Associated soft tissue swelling and enhancement suggest an **epidural abscess**.
    - **Cord compression** at this level explains the neurological deficits (leg weakness, sensory loss, and bladder dysfunction).

