

Back and Lower Extremity Examination

Patient's Name: JOHN DOE

Date: JAN 3, 2011

Physical Examination:

General physical examination showed 25 year old. (well) / poorly / under / over / normally developed, Caucasian / Hispanic / (Asian) African American / other _____ (male) / female / (adult) teenager / child in no / mild / (moderate) severe distress.

Body Shape: well proportioned / (thin) / slender / husky / overweight.

Posture: good / (fair) / poor / stooped / antalgic / forward head.

Gait: (normal) guarded / limped / irregular / needs assistance to walk / unable to walk.

Movements: normal / (restrictive) / stiff / slow / guarded with or without great / some / no difficulty.

The patient was (alert) / drowsy / (oriented) / disoriented to time, place, person and/or situation.

General Data:

Weight: 152# Height: 5'5" Temp: 98.6 Respiration: 10

Pulse Rate: 72 (Right) handed / Left handed

Blood Pressure: Left arm: 128/82 Right arm: 130/84

Temporomandibular Joint Disorders:

Prior to this accident:

After this accident:

<u>-</u>	Difficulty opening the mouth?	<u>+</u>
<u>+</u>	Audible noises from the jaw joints?	<u>+</u>
<u>-</u>	Does the jaw get "stuck" or "locked"?	<u>+</u>
<u>-</u>	Pain about the ears or cheeks?	<u>-</u>
<u>-</u>	Pain chewing / yawning or wide opening?	<u>-</u>
<u>-</u>	Does the bite feel uncomfortable or unusual?	<u>-</u>
<u>-</u>	History of loose teeth?	<u>-</u>

Facial symmetry? NL

Jaw movements? DEVIATES TO (L) & OPEN

Lateral deviation of the jaw? (+) TO (R)

Crepitus? (L) & (R)

Palpatory tenderness? (+) (R) MASSETER

Clicking? (+) (R) (L)

Other: _____

Cranial nerve examination: CN III TO XII WNL; CN XII TONGUE DEVIATION TO (R)

STANDING:

Inspection / Palpation / Percussion

Inspection:

Posture: Normal/Lordosis/Kyphosis/Scoliosis (type) S SHAPED T/S CONVEX ON (L)
4/5 " " " (R)

Present after forward bending? +

Scars, lacerations, hematoma or ecchymosis? POST OP SURGICAL SCAR L4 TO S1
TATOO OF CROSS ON (R) Hip.

Patient's Name: DOE, JOHN Date: 1/3/11

Heel Walking: ⊖ Toe Walking: ⊕ Ⓛ Forward Bending: ⊕ Supported forward bending: ⊕ ↑ LBP

Trendelenberg: ⊖ Squat and Rise: ⊖ Vertebral percussion of the spine ⊕ L4

Palpation:

Tenderness: (+1: Patient states that the area is mildly tender - annoying; +2: Patient states that the area is moderately tender; +3: Patient complains of considerable tenderness and withdraws momentarily in response to the test pressure; +4: Patient complains of severe tenderness, and withdraws immediately in response to test pressure, and is unable to bear sustained pressure.)

Lumbar spine: ⊕ L4/L5 Radiation?: Ⓡ L3/L4 PARASPINAL TO BUTTOCK

Paravertebral musculature: 2+ L1 TO L4 Ⓛ; 3+ L1 TO L5 Ⓡ;

Ⓡ Q.L. 3+ SWOLLEN; Ⓛ Ⓡ Psoas M. 2+; Ⓡ TFL 3+

Sciatic notch: ⊕ Ⓡ Posterior thigh: ⊕ Ⓡ Posterior calf: ⊖

Muscle Tone: (Normal: 0; +1: Sustained muscle contraction with mild resistance to passive motion in any direction; +2: Sustained muscle contractions with moderate resistance to passive motion in any direction with some restriction in motion; +3: Muscle rigidity with complete resistance to passive motion in some direction; +4: Spasm triggered by/with movement or external irritation, e.g., probing on movement triggers a muscle contraction; +5: Exists in/with absence of movement or external irritation, e.g., muscle contracture; observable and often causes antalgic posture or listing.)

⊖

Trigger/Myofascial Points: (Active, Latent, Satellite and location)

Ⓡ L3/L4 PARASPINALS ACTIVE - TO Ⓡ BUTTOCK

Lumbosacral Ranges of Motions: (with location of pain)

	ROM	Pain
Flexion (0-90)	Range <u>65</u>	
	Lacks <u>18</u> cm/inches from fingertips to floor with Pain? <u>⊕</u>	
Extension (0-30)	Range <u>24</u>	<u>+</u>
R. Lateral Flexion (0-30)	Range <u>30</u>	<u>-</u>
L. Lateral Flexion (0-30)	Range <u>22</u>	<u>+</u>
R. Rotation (0-30)	Range <u>28</u>	<u>-</u>
L. Rotation (0-30)	Range <u>30</u>	<u>-</u>

P.S.I.S. Levels: Level _____ Superior Ⓡ Inferior Ⓛ

SITTING:

Straight Leg Raising: Right ⊖ Left ⊖
Kemp's Test for disc protrusion: Right ⊕ Left ⊖
Sitting Flexion Test: Right ⊖ Left ⊖

Reflexes

(0: No response; 1+: Hyporeflexia; 2+: Normal; 3+: Hyperreflexia; 4+: Hyperreflexia with transient clonus; 5+: Hyperreflexia with intermittent or sustained clonus)

Patella reflex (L4) Right ++ Left ++
Achilles reflex (S1) Right + Left +
Babinski Right ⊖ Left ⊖

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Sensation: (dermatomes)

Touch ⊖
Pinprick ↓ ⊙ L4
Temperature ⊖
Vibration ⊖
Light Touch ↓ ⊙ L4/L5

SUPINE:

Leg length:(anterior superior iliac spine to medial malleolus) Right 35 cm/in Left 35 cm/in
Apparent leg length: (umbilicus to medial malleolus) Right 37½ cm/in Left 37¼ cm/in

Lower Extremity Girth Measurements

Measurement of Thighs:
3" above patellar: Right 18½ cm/in Left 18½ cm/in
6" above patellar: Right 19 cm/in Left 19½ cm/in
Measurement of Calves:
6" below patellar: Right 8 cm/in Left 8¼ cm/in

Orthopedic Tests and Signs:

Straight leg raising: (range in degrees) Right + Left -
Lasegue's sign: Right - Left -
Braggard's sign: Right + Left -
Milgram's test (herniated disc): Right - Left -
Patrick (Fabere's): Right - Left -
Facet sign +
Gaenslen's test: Right - Left -
Sacroiliac joint compression test: Right - Left -
Pelvic rock method: Right - Left -
Sacroiliac joint gapping: Right - Left -
Thomas test: Right + Left +
Knee to chest test: Right - Left -
Goldwaith's test: Right - Left -
Neck flexion test: Right - Left -
Beevor's sign: Right - Left -

Supine ASIS levels: Level _____ Superior (R) Inferior (L)

Tarsal tunnel compression test: ⊖

Pulses of the Lower Extremities: (0 absent, + diminished, ++ normal, +++ increased)

Dorsipedal ++ Popliteal ++ Posterior tibial +

SIDE:

Obers Test + (R)

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PRONE:

Sciatic notch tenderness: Right (+) Left (-)
 Back hyperextension with push-up: Degree 30 Pain +
 Knee flexion: Right - Left -
 Passive hip extension: Right + Left -
 P.S.I.S. Levels: Level _____ Superior (R) Inferior (L)
 Sacral Sulcus: (-) ILA levels: (-)
 Prone internal rotation of hips: (-) Prone external rotation of hips: (-)

Sacral Dermatomes: (S3, S4, S5)

Light Touch (-) Pinprick: (-) Numbness: (-)

Lower Extremity – Range of Motion / Muscle Strength

	Active ROM		Passive ROM		Strength	
	Left	Right	Left	Right	Left	Right
Hip:						
Flexion (L1,2,3) (0-110)	NL	NL	NL	NL	4/5	4/5
Extension (S1) (0-30)					5/5	5/5
Abduction (L5) (0-50)						4/5
Adduction (L2,3,4) (0-30)						5/5
Int. Rotation (0-35)		30°				4/5
Ext. Rotation (0-50)		40°				5/5
Knee:						
Flexion (0-135)		NL				
Extension (0-180)						
Ankle:						
Dorsiflexion (0-15)						
Plantar flexion (0-50)						
Inversion (0-35)						
Eversion (0-20)						
MTP Joints:						
Flexion						
Extension						
Abduction						
Adduction						
Toes:						
Flexion H.L. (0-25)						
Extension H.L. (0-40)						

Nerve Root	Dermatome	Muscle	Reflex
L4	Medial leg and medial great toe	Knee Extensors	Patellar
L5	Lateral leg and top of foot	Ankle and Hip Extensors	
S1	Lateral foot	Ankle Flexors	Achilles