

Patient Name _____ Examinee Label _____

SOAP NOTE

Do Not write on opposite side of page

Comments

S cc: 35 yo Caucasian male presents with low back pain x 2 days.
Hxcc: Patient was shoveling snow when pain started in the low back on the right side. Pain started at an 8/10 and now is a 6/10 pain described as tight and constant. Activity makes pain worse, nothing makes it better. Patient has taken Motrin and used a heating pad since onset. Patient denies any numbness, tingling, burning pain, or pain that radiates down either leg, also denies any previous low back trauma or pain.
PMH: HTN – Controlled with Metoprolol.
PSH: None
Meds: Metoprolol for HTN.
Allergies: NKDA
FH: Mother arrhythmia and CAD, Father CAD.
SH: Smoked 15 years ago, unknown pack years. 3 glasses of wine/week.
Bank Teller.
ROS: General: Denies change in weight, fatigue, insomnia
CV: Denies chest pain, irregular heartbeat, rapid heart beat
Resp: Denies shortness of breath, dyspnea on exertion, cough, orthopnea
GI: Denies nausea, vomiting, constipation, diarrhea, heartburn
Musculoskeletal: denies recent fractures, sprains, strains, limited use of any joint
Neurological: Denies seizures, tremors, numbness or tingling

Score __/ __

O VS: T 98.5° F, BP 129/80, R 14, P 72

Gen: Minimal distress. Alert and oriented to person, place, and time.
Pleasant Affect.

Heart: RRR, no murmurs, gallops, or rubs.

Lungs: CTA in all 6 lung fields.

Neuro: Lower Extremity Strength 5/5 and symmetric. Lower extremity reflexes +2/4, symmetric at patella and Achilles.

Musculoskeletal: Gait with hip hike on left heel strike. Moderate tenderness at right L5 and sacroiliac junction. Negative straight leg test. R upper lumbar hypertonicity. Decreased ROM to trunk flexion. + R standing flexion test, – seated flexion test. L5FRSright. R anterior innominate.

Score __/ __

- A. (Diagnosis and/or problem list)
1. Low back strain
 2. Somatic Dysfunction
- Lumbar, Pelvis
 3. HTN – Controlled with Meds

- P.
1. Ibuprofen, PRN
 2. OMT utilizing Muscle Energy to Pelvis - Pt tolerated Tx well with decreased pain and improved structural findings
 3. F/U in 2 days and call if worsening symptoms

Score __/ __