NR511 Faculty Tip Sheet: Week 7-Musculoskeletal

Instructions: this tip sheet accompanies the notes designed for this case located in i-Human. Use the tip sheet to guide you in scoring the grading rubric and for coaching your students when they have questions and need guidance for improvement.

Brief Case Summary: Gloria Jenkins- Herniated Disk with radiculopathy

- The patient is a 68-year-old female
- Presents with acute onset of low back pain radiating down the right leg after lifting tables

Key Findings Students Must Identify in the Case:

- Acute onset of low back pain radiating down the right leg after lifting tables
- Right lower sensory deficit for 4 days
- Right lower motor sensory deficit for 1 day
- Hyporeflexia at right at right patellar tendon
- Positive right straight leg raise test; positive contralateral straight leg raise
- Lack of point tenderness
- Lack of saddle anesthesia and bladder and bowel dysfunction
- Has osteoporosis

Coaching students if they have questions about the key findings:

- For this client, the MSAP is back pain- this is the reason the client presented to the office
- It is also important to view/determine the key finding list because, from a clinical standpoint, the MSAP may differ from the client's chief complaint.

Grading Tips Using the Rubric: in this area, be prepared to explain to students why the following information is important and why points may be deducted. Students often omit important subjective/objective data.

Focused health history (graded by i-Human): retrieve report from i-Human to provide insight and guidance

Focused physical exam (graded by i-Human): retrieve report fom i-Human to provide insight and guidance

EHR documentation subjective data:

- Reason for the encounter: Back pain
- HPI: a 68-year old woman with 4-day history of low back pain (LBP). Pain rated 7/10 and is related to moving heavy table. There is worsening pain (8/10) radiating down her right leg from her low back to her right posterior calf. There is no report of trauma preceding the pain.

- Past medical history:
    - Osteoporosis

- Family history:
    - Cancer
- Social history:
    - Smokes
- ROS:
    - General: Normal
    - Integumentary/breast: Normal
    - HEENT/Neck: Normal
    - Cardiovascular: Normal
    - Respiratory: Normal
    - Gastrointestinal: Normal
    - Genitourinary: Normal
    - Musculoskeletal: Back pain that radiates down right leg from low back to right posterior calf.
    - Allergic/immunologic: Normal
    - Neurologic: Normal
    - Psychiatric: Normal

Coaching students if they have questions about the history-taking:

History-taking should focus on describing the back pain. For this client:

- The pain is worsening (8/10) with radiation down the right leg from low back to right posterior calf

EHR documentation objective data:
Physical exam:

- Vital sign:
    - Elevated BP (136/80)
- Neurological:
    - Alert and oriented
    - 4/5 resisted right ankle dorsiflexion and plantar flexion
    - 5/5 resisted left ankle dorsiflexion and plantar flexion
    - Diminished light-touch perception on the medial aspect of the right lower extremity to the medial malleolus
    - Right straight leg raise: Pain radiating down the leg to below the knee when hip flexed to 45 degrees
    - Crossed straight leg raise: Positive symptoms in right leg

- Musculoskeltal:
    - Spinal extension worsens back pain