

Low Back Pain Physical Exam

Seated Bending / Rotating / Side Flexing

Seated Pull Test: Neutral / Flexion / Extension

5X Bodyweight Squat:

5X Sit-to-Stand Test (>11.4 sec, MCID: 2.3 sec):

Floor Transfer: Independent / Assisted / Dependent

Movement/Activity that gives most trouble?

SLR:

Hip Mobility:

Prone Lie x 2 mins:

Palpation:

Front Raise Load Test:

Floor Pull Test:

General Movement Assessment

Protective: Slow, Thoughtful, Deliberate

Relaxed: Free, Thoughtless, Fearless

Local / Radicular Pain / Radiculopathy

Red Flags

Fracture: Age + Trauma, Female, Thoracic Pain

Cancer: Age (51/20) + History + Weight Loss

Cauda Equina: BL Sciatica, Bladder/Bowel, Saddle Anesthesia

Infection: Immunosuppression, Surgery, IV drugs, Fever

Diagnosis

Disc Pathology: Leg > Back, Dermatomal, Weakness, Sensory

Stenosis: Age (48), BL, Leg > Back, Relief w/ Sitting, Worse Walking

Spondyloarthritis: Age <40, Night pain, Insidious, Exercise

improves, Rest no change

Prognosis

Non-Specific: 80% of people 100% better in 2-6 wks

Sciatica: 75% of people 50% better @ 12 wks

Key Messages

Back pain is normal: 20% per year, 80% lifetime

Only 1% of cases medically serious

Most of cases last 2-6 weeks

Sensitized: Not Damaged

Remain Active

Areas of Treatment Focus

Tissue Capacity Pain Relief Belief Structure

Movement Strategy Adherence

Notes