# Back Discomfort in a 12-Year-Old Boy

Review of Systems

## History of Present Illness

A 12-year-old boy is brought to the office by his mother for a well-child checkup. The patient and his mother both state that the patient has been otherwise well except for occasional mild pain and stiffness in the upper back. Symptoms began gradually about a year ago and are present intermittently. The pain and stiffness do not bother him significantly or limit his activities, and they have never awakened him from sleep. He denies any trauma or overuse. He is not currently playing any organized sports although he is able to be normally active with friends and siblings.

## Physical Examination

- **General appearance**: African-American male child in no apparent discomfort, normal build and appearance.
- **Height**: 160 cm (92nd percentile), Weight: 40 kgs (47th percentile)
- **Vital signs**:
  Temperature: 37° C
  Pulse: 80 beats/min
  BP: 105/66 mm Hg
  Respirations: 16/min
- **Skin**: No lesions or abnormal markings.
- **HEENT**: Moist mucous membranes, normal dentition, no caries. Eye examination and vision normal bilaterally. Hearing grossly normal.
- **Pulmonary**: Lungs clear to auscultation bilaterally. No chest deformity.
- **Cardiovascular**: Regular rate and rhythm, no murmurs, rubs, or gallops
- **Gastrointestinal**: Abdomen soft, nontender, nondistended.
- **Genitourinary**: Normal male genitalia Tanner Stage 3, testes descended bilaterally.
- **Musculoskeletal**: Back has mild paraspinous tenderness bilaterally in the thoracic region. When patient bends forward at the waist with his arms hanging and palms together, his shoulders are not level and his scapulae appear asymmetric. Palpation of the spinous processes show slight right thoracic and left lumbar curvature. There is no leg-length discrepancy, and iliac crests are symmetrical. Extremities have full range of motion, no visible or palpable deformities or tenderness of extremities or joints.
- **Neurologic**: Alert and oriented to person, place, and time. Normal patellar relaxes 2+ bilaterally, 5/5 motor strength in bilateral upper and lower extremities. Normal gait. No clonus. No strictures or rigidity in the extremities.
- **Mental status**: Appropriate affect and behavior.

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(if you want to read more and see test results, go to https://www.msdmanuals.com/professional/pages-with-widgets/case-studies)

**What best explains the reason for the visit?**

A. The patient is experiencing severe acute symptoms
B. The visit is primarily routine, with minor complaints

**How would you describe the progression of symptoms?**

A. They appeared suddenly and worsened quickly
B. They developed gradually and occur intermittently

**What can be inferred about the impact of symptoms?**

A. They significantly interfere with daily activities
B. They are noticeable but not limiting

**How serious do the symptoms appear based on the history?**

A. Potentially severe and urgent
B. Mild and not immediately concerning

**Which finding suggests a possible abnormality?**

A. Symmetrical iliac crests
B. Asymmetry in the scapulae

**What best summarizes the overall clinical picture?**

A. A generally healthy patient with minor findings
B. A patient with multiple severe abnormalities

## Notice Language

Look at these sentences:

- "Lungs clear to auscultation"
- "Abdomen soft, nontender"
- "Skin: No lesions"

**What do you notice?**

A. They are complete sentences
B. Verbs are omitted (not expressed)

Which sentence is more typical in a medical report?

A. The doctor examined the patient B. The patient was examined

**In medical notes, verbs are often omitted.**
**In reports and articles, passive voice is used.**

**REMEMBER! https://test-english.com/grammar-points/b1/active-passive-voice/**

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## Choose the correct passive form

**1. The doctor examined the patient.**
→ The patient _____

A. was examined
B. examined

**2. The physician recorded the vital signs.**
→ The vital signs _____

A. were recorded
B. was recorded

**3. The doctor assessed the lungs.**
→ The lungs _____

A. was assessed
B. were assessed

**4. The physician evaluated the back.**
→ The back _____

A. was evaluated
B. were evaluated

**5. The doctor performed a neurological examination.**
→ A neurological examination _____

A. was performed
B. were performed

**6. The doctor identified no abnormalities.**
→ No abnormalities _____

A. were identified
B. was identified

# 🎧 Listen and choose the correct option

1. A **thirty-eight / forty-two**-year-old man was brought to the emergency department.
2. The patient arrived after a **car accident / sports accident**.
3. An initial assessment was **performed / completed later** on arrival.
4. Vital signs were found to be within **normal limits / slightly abnormal ranges**.
5. **No significant / only minor** injuries were identified during the examination.
6. A neurological examination was **carried out / considered unnecesary**.
7. X-rays were performed to **confirm** / **exclude fractures**.
8. No **acute abnormalities / long-term complications** were detected.
9. Analgesics were **administered / recommended for later use**.
10. The patient was **discharged / transferred** after observation.

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