

Diagnostic Work-Up Checklist

Possible Cause	Key features on history or physical examination	Imaging	Additional Studies
<input type="checkbox"/> Cancer	<input type="checkbox"/> History of cancer* with new onset of LBP (<i>*Not including non-melanoma skin cancers</i>)	<input type="checkbox"/> X-ray or <input type="checkbox"/> MRI	<input type="checkbox"/> ESR
	<input type="checkbox"/> Unexplained weight loss	<input type="checkbox"/> Lumbosacral x-ray	
	<input type="checkbox"/> Failure to improve after 1 month		
	<input type="checkbox"/> Age >50 years with new or changed low back pain		
<input type="checkbox"/> Multiple risk factors present	<input type="checkbox"/> X-ray or <input type="checkbox"/> MRI		
<input type="checkbox"/> Vertebral infection	<input type="checkbox"/> Fever	<input type="checkbox"/> MRI	<input type="checkbox"/> ESR and/or <input type="checkbox"/> CRP
	<input type="checkbox"/> Intravenous drug use		
	<input type="checkbox"/> Recent infection		
<input type="checkbox"/> Cauda equina syndrome	<input type="checkbox"/> Urinary retention	<input type="checkbox"/> MRI	None
	<input type="checkbox"/> Motor deficits at multiple levels		
	<input type="checkbox"/> Fecal incontinence		
	<input type="checkbox"/> Saddle anesthesia		
<input type="checkbox"/> Vertebral compression fracture	<input type="checkbox"/> History of osteoporosis	<i>Consider</i> <input type="checkbox"/> Lumbosacral x-ray	None
	<input type="checkbox"/> Use of corticosteroids		
	<input type="checkbox"/> Older age (>65 years, women; >75 years, men)		
<input type="checkbox"/> Ankylosing spondylitis	<input type="checkbox"/> Symptoms for > 3 months	<i>Consider</i> <input type="checkbox"/> Anterior posterior pelvis x-ray, if multiple features present	<input type="checkbox"/> HLA-B27
	<input type="checkbox"/> Morning stiffness		
	<input type="checkbox"/> Improvement with exercise		
	<input type="checkbox"/> Alternating buttock pain		
	<input type="checkbox"/> Awakening due to back pain during the second part of the night		
	<input type="checkbox"/> Younger age (20-30s)		
<input type="checkbox"/> Male			
<input type="checkbox"/> Severe/ progressive neurologic deficits	<input type="checkbox"/> Progressive motor weakness	<input type="checkbox"/> MRI	<i>Consider</i> <input type="checkbox"/> EMG/NCV
<input type="checkbox"/> Herniated disc	<input type="checkbox"/> Back pain with leg pain in an L4, L5, or S1 nerve root distribution	<i>If symptoms present for < 1 month: None</i>	<i>If symptoms present for < 1 month: None</i>
	<input type="checkbox"/> Positive straight-leg-raise test or crossed straight-leg-raise test	<i>Symptoms present >1 month, consider:</i> <input type="checkbox"/> MRI	<i>Symptoms present >1 month, consider:</i> <input type="checkbox"/> EMG/NCV
<input type="checkbox"/> Spinal stenosis	<input type="checkbox"/> Radiating leg pain	<i>If symptoms present for < 1 month: None</i>	<i>If symptoms present for < 1 month: None</i>
	<input type="checkbox"/> Older age (>65 years, women; >75 years, men)		
	<input type="checkbox"/> Pseudoclaudication ¹ (Note: Weak predictor)	<i>Symptoms</i>	<i>Symptoms</i>

¹ Painful cramps that are not caused by peripheral artery disease but rather by spinal, neurologic, or orthopedic disorders, such as spinal stenosis, diabetic neuropathy, or arthritis. *Mosby's Medical Dictionary, 8th. Elsevier, 2009. Print.*

		<i>present >1 month, consider:</i> <input type="checkbox"/> MRI	<i>present >1 month, consider:</i> <input type="checkbox"/> EMG/NCV
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Adapted from the *Diagnosis and Treatment of Low Back Pain: A Joint Clinical Practice Guideline from the American College of Physicians and the American Pain Society*, *Ann Intern Med.* 2007;147:478-49.