ExTenTrac® Elite

C A S E S T U D Y 104 Patient Identification Number

Patient: 38 year-old male presenting acute onset of severe lower

back pain with radiation to the right buttock and leg. Painful

gait, aggravated by prolonged sitting.

Date of onset: March 2005

Date of first Treatment: April 8, 2005

Date of Re-examination: June 5, 2005

Presenting Symptoms Pre EXTENTRAC® Elite:

Severe lower back pain with right radiculopathy extending to the right

buttock, posterior-lateral thigh, leg.

Prior Treatment: Medication – Advil, Mobic.

Examination Findings:

Lumbar flexion 60/90

Lumbar Extension 10/30

Lumbar Rotation 30/30

Lateral Flexion 15/35

All with Pain.

SLR: 30 degrees.

Provocative Testing: Active extension increases pain, flexion decreases leg and back pain.

Imaging Studies: MRI of lumbar spine obtained without on April 8, 2005 Imaging reveals the following:

- 1. LARGE RIGHT L4-L5 DISC PROTRUSION DISPLACING THE CAUDA EQUINA AND RIGHT L5 NERVE ROOT, RESULTING IN MODERATE CENTRAL SPINAL STENOSIS.
- 2. THERE MAY BE A SLIGHT LEFT PARACENTRAL L5-S1 DISC PROTRUSION, WHICH DOES NOT RESULT IN CENTRAL SPINAL STENOSIS.
- 3. DEGENERATIVE DISC AND FACET JOINT CHANGES, AS DESCRIBED.

Diagnosis: Spinal Stenosis / Sciatic Neuritis

EXTENTRAC® Elite Treatment Protocols:

1st Protocol - Horizontal fully automated decompression, prone position, automated intermittent cycle, ankle straps - leg mediated Y-Axis decompression. Leg assembly deviated left of milline.

2nd Protocol - 'Hands-on' decompression-mobilization utilizing Extentrac's M3D $^{\circledR}$ Leg Control System. This 2nd protocol procedure was initiated <u>only</u> in the Z-Axis direction (flexion-extension) following moderate symptomatic improvement.

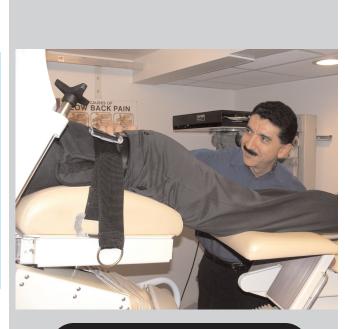
Decompression Setting: Maximum Load - 90 lbs. Delay at Max – 30 seconds. Delay at minimum -10 sec

Procedure was preceded or followed by electric muscle stimulation with moist heat.

Treatment Outcome:

Presenting Symptoms Post EXTENTRAC® Elite: Asymptomatic. No lower back pain or radiating leg pain. Returned to work without residual disability.

Number of Treatments: 11 within 8 weeks.



Prone "Hands-On" Manually Applied Decompression with Z-Axis Flexion Mobilization