

Neurological Health Assessment Report

Patient Name	Michael Anderson
Patient ID	NH-2026-4587
Age	54 Years
Gender	Male
Date of Birth	14 August 1971
Assessment Date	22 May 2026
Consulting Neurologist	Dr. Sarah Mitchell, MD
Hospital	NeuroCare Institute

Chief Complaints

- Persistent headaches over the last 3 months
- Difficulty concentrating during work activities
- Mild short-term memory disturbances
- Occasional dizziness and imbalance
- Disturbed sleep and fatigue

Medical History

The patient has a history of hypertension for approximately 7 years and is currently under medication. Family history reveals early cognitive decline in the patient's father. No previous history of seizures, stroke, or traumatic brain injury reported.

Neurological Examination

Examination Area	Findings
Mental Status	Alert, oriented, mild memory impairment observed
Speech	Normal fluency and comprehension
Motor Function	Muscle strength preserved in all extremities
Sensory Function	No sensory deficits identified
Coordination	Mild instability during tandem walking
Reflexes	Deep tendon reflexes within normal range

MRI Brain Scan Findings

MRI imaging demonstrates mild cortical atrophy in the frontal region with early white matter ischemic changes. No evidence of acute infarction, intracranial hemorrhage, or mass lesion identified.

EEG Findings

Electroencephalogram (EEG) revealed normal background rhythm activity with no epileptiform discharges or seizure patterns detected.

Clinical Impression

Clinical presentation and imaging findings are suggestive of Mild Cognitive Impairment (MCI) with early neurodegenerative changes. Continued neurological monitoring and preventive cognitive management are advised.

Recommendations

1. Neurological follow-up every 6 months
2. Cognitive therapy and memory exercises
3. Strict blood pressure management
4. Regular physical activity and balanced diet
5. Adequate sleep and stress reduction practices
6. Repeat MRI evaluation after 12 months if symptoms progress

Dr. Sarah Mitchell, MD
Consultant Neurologist
NeuroCare Institute

This report contains fictional patient data generated for demonstration and sample documentation purposes only.