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Name: Enkhtaivan

ID number: OA88031312

Age: 36

Gender: Male

### **Result of MRI**

Test name: Non-contrast Magnetic Resonance Imaging (MRI)

Patient's complaint: "The patient sustained a spinal fracture in childhood and now experiences chronic back pain."

### **Number of MRI taken: "first instance"**

#### **Description:**

The curve of the lumbar spine is disrupted due to a fracture in the L1 vertebra. Additionally, the Th12 thoracic vertebra shows an abnormal form. At lower levels, the L2 vertebra exhibits an abnormal form. The upper levels display evidence of old vertebra fractures.

The height of the other lumbar vertebrae is normal, and the frequency of the signals is within normal limits. At these levels, the ligamentum flavum does not show thickening. The facet joint space is also normal.

L1/L2: The intervertebral disc exhibits an abnormal shape, with a significantly decreased T2 signal frequency. The disc is extending beyond the edges of the vertebral apophyses and is protruding. At this level, the vertebral canal is significantly narrowed, the spinal cord is compressed, and the T2 signal is significantly increased. Because of L2 vertebral fracture, the nerve root narrowed on both sides and compressed exiting nerve root.

L3/L4: Vertebral disc's signal's frequency is regular and normal, height is normal and nerve root has free spaces on both sides.

L4/L5, L5/L1: Vertebral disc's signal frequency is decreased and disc is extending beyond the edges of vertebral apophyses and is bulging centrally. Because of this, nerve roots' canal is narrowed at both sides and touches exiting nerve roots.

Sacroiliac joint coronal T2 is normal.

