

MRI Lumbar Spine Report

The patient presents with moderate central canal stenosis noted between the L1-L2 levels. This is associated with left side neural foramina narrowing predominantly due to severe subarachnoid desiccation (desmoid). Associated diffuse disc bulges are also observed compressing both lateral recesses of the cauda sciatic nerve roots as well as exit canals, mainly affecting the right S1 root structure. A mature Schmorhahn's feature along with annular tears may be contributing factors for symptomatology. No significant abnormalities identified beyond these features. MRI scan does not show any evidence of intramedullary or extradural pathologic processes which could account for radiculopathy. Clinically correlates imaging studies with physical examination results prioritizing treatment options including surgery if indicated by worsening neurological status. Impression: Central canal and unilateral facet joint degenerative changes accompanied by multiple compression lesions likely secondary to endplate disease causing acute neck pain. Multilevel lumbosacral ligamentous hypertrophy appears more prominent bilaterally compared to normally sided structures. Features suggestive of muscle belly herniation through an open intervertebral space extending into all three compartments from D6