

MRI Lumbar Spine Report

The cervical and thoracic spinal canal appears normal with mild narrowing noted. Cervical foramina are also within normal limits showing no significant compression or thecal sac encroachment. Lumbo-pelvic region shows diffuse disc bulges primarily affecting levels L4–L5 and L5–S1 compressing both nerve roots as well as exit canals. A right paracentral lumbosacral MRI is performed due to persistent lower back pain of unknown etiology for further evaluation. No evidence of intradiscal herniation beyond an upper margin of annulus fibrosus compared to adjacent ligamentous structures. Both neural foraminae appear adequately enlarged without signs of desiccation or degenerative changes involving facet joints. Diffused subarachnoid hemorrhage (SAH) likely secondary to trauma identified by contrast enhancement extending from left side down into pelvis through abdomen below diaphragmatic margins. Multiplicity of blood vessels involved including small feeder vein along anterior vena cava; additional feeders seen via transperitoneal route which may be contributing to intravenous bleeding. Featureless muscle bellies show hypertrophied tendon sheath reactive features suggestive of increased volume load resulting in soft tissue swelling. Descriptively difficult to differentiate between