

# MRI Lumbar Spine Report

The patient's lumbosacral MRI demonstrates moderate left subarachnoid space narrowing secondary to disc protrusion of the L4-L5 levels. Multilevel degenerative changes are noted with annular tears and desiccation. No significant neural foramina or central canal compression is detected. A right paracentral 6 mm cyst compresses both exit nerve roots within the right S1 foramen. This may be contributing to radiculopathy symptoms. Featureless endplate disease affects all facet joints but shows no evidence of abnormal motion beyond mild wear features associated with aging. Both sacroiliac (SI) joints show reactive sclerosis without ligamentous hypertrophy. Bilateral multifocal diffuse disc bulges are present between DIVA bodies and encasing cauda equinae extending into the lateral recesses. An anteriorly located large intradiscal collection is observed mainly involving the posterior elements of the lower thoracic region which appears more prominent than normal due to volume increase by an accumulation of mucoid material. Associated muscle spasm can also contribute to this feature. There has been some postoperative scar formation adjacent to T8 and upper trunk bony structures since previous surgery. All other examination parameters appear satisfactory under noncontrast imaging protocols.