

# MRI Lumbar Spine Report

The cervical and thoracic levels of the spinal canal appear within normal limits. Mild diffuse disc bulges are noted with both L1-L2 and L2-L3 levels, slightly compressing the neural canals but not significant enough to cause symptoms or neurological deficits. Featureless subarachnoid space is present without evidence of hemorrhage. A mild left side lumbosacral ligamentum flavum hypertrophy is observed which may be contributing marginally to an increased intradiscal pressure. No additional pathological features were identified beyond this finding. Both sides show moderately enlarged right sacrum due to obliteration secondary to previous surgery (described elsewhere). Multilevel degenerative changes including narrowed foramina, facet joint hypertrophy, annular tears, desiccation cyst formation, and endplate sclerosis are seen throughout the lower spine. Descriptively discussed below for clarity: Left paracentral central disc protrusion through all three layers abuts against S1 nerve root exit canal. This appears more pronounced posteriorly compared to anteriorly. It results from chronically elevated intravertebral pressures associated likely by recurrent microscopic herniations over time as well as possibly exaggerated motion related to muscle imbalance. Associated cauda equ