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PATIENT:	MACEDON, MICHAEL	EXAM DATE:	06/27/2022 11:00 AM
STUDY DESCRIPTION:	MRI CERVICAL SPINE WITHOUT CONTRAST	MRN:	MACM70308
DOB:	05/26/1967	REFERRING PHYSICIAN:	Allen, Rona D.C.
CLINICAL HISTORY:	N/F Pain due to	GENDER:	M

TECHNIQUE: Multiplanar and multisequential MRI examination obtained.

COMPARISON: None.

FINDINGS:

ALIGNMENT: There is straightening of cervical lordosis.

BONES/MARROW: Modic II discogenic endplate signal changes are present at multiple levels. Marrow signal is otherwise preserved.

CRANIOCERVICAL JUNCTION/CORD: The cervicomedullary junction appears unremarkable. There is no Chiari malformation or abnormality within the visualized brainstem. Disc protrusion at C3-4 mildly compresses the cord. Cord signal is maintained with no cord edema or myelomalacia.

DISCS: There is loss of disc T2 signal at multiple levels compatible with mild disc desiccation. No significant osteophyte formation is noted.

SOFT TISSUES: Unremarkable.

LEVELS:

C2-3: Broad-based central disc hemiation is present. This results in compression of the ventral CSF space (axial T2 image 3 and sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 4 mm. Transverse dimension of protruded portion of disc measures 13 mm. AP diameter of canal measures 10.6 mm. Narrowing of right neural foramen.

C3-4: Left/paracentral disc hemiation is present. This results in compression and impingement upon ventral CSF space and cord (axial T2 image 7 and sagittal T1 and T2 image 7). However, no cord edema or myelomalacia demonstrated. AP diameter of disc protrusion measures 3.5 mm. Transverse dimension of protruded portion of disc measures 12.3 mm. AP diameter of canal measures 8.9 mm. Narrowing of right neural foramen.

C4-5: Broad-based central disc hemiation is present. This results in compression of the ventral CSF space (axial T2 image 12 and sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 3.6 mm. Transverse dimension of protruded portion of disc measures 15 mm. AP diameter of canal measures 13.3 mm. Narrowing of right neural foramen.

C5-6: Broad-based central disc hemiation is present. This results in compression of the ventral CSF space (axial T2 image 16 and sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 3.8 mm. Transverse dimension of protruded portion of disc measures 15 mm. AP diameter of canal measures 14.7 mm. Narrowing of left neural foramen.

C6-7: Broad-based central disc hemiation is present. This results in compression of the ventral CSF space (axial T2 image 20 and sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 3.2 mm. Transverse dimension of protruded portion of disc measures 17 mm. AP diameter of canal measures 13.9 mm. Narrowing of right neural foramen.



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C7-T1: There is no evidence of disc bulge, hemiation, or spinal stenosis. Neural foramina are patent. There is no nerve root compression.

## IMPRESSION:

Straightening of cervical lordosis.

At C2-3, broad-based central disc hemiation is present resulting compression of the ventral CSF space. Narrowing of right neural foramen.

3. At C3-4, left/paracentral disc hemiation is present resulting compression and impingement upon ventral CSF space and cord. Narrowing of right neural foramen.

4. At C4-5, broad-based central disc hemiation is present resulting compression of the ventral CSF space. Narrowing of right neural foramen.

5. At C5-6, broad-based central disc hemiation is present resulting compression of the ventral CSF space. Narrowing of left neural foramen.

6. At C6-7, broad-based central disc hemiation is present resulting compression of the ventral CSF space. Narrowing of right neural foramen.

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