QUEENS RADIOLOGY IMAGING PC

DIAGNOSTIC RADIOLOGY

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PATIENT:	MACEDON,MICHAEL	EXAM DATE:	06/27/2022 11:30 AM
STUDY DESCRIPTION:	MRI LUMBAR SPINE WITHOUT CONTRAST	MRN:	MACM70308
DOB:	05/26/1967	REFERRING PHYSICIAN:	Allen, Rona D.C.
CLINICAL HISTORY:	N/F Pain due to Accident.	GENDER:	M

TECHNIQUE: Multiplanar, and multisequential MRI examination obtained.
FINDINGS:
ALIGNMENT/ANATOMY: There is straightening of lumbar lordosis.
BONE/MARROW: Modic II discogenic endplate signal changes are present at multiple levels. Marrow signal is otherwise preserved.

CONUS/FILUM: The conus medullaris and filum terminale are within normal limits.
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:
L1-2: Right/paracentral disc herniation is present. This results in compression and impingement upon the ventral thecal sac (axial T2 image 3, sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 6 mm. Transverse dimension of protruded portion of disc measures 27 mm. AP diameter of dural sac measures 10 mm. Narrowing of left neural foramen. There is possible impingement of the exiting nerve root (sagittal T2 image 4). Narrowing of right neural foramen (sagittal T2 image 10).
L2-3: Broad- based central disc herniation is present. This results in compression and impingement upon the ventral thecal sac (axial T2 image 8, sagittal T1 and T2 image 8). AP diameter of disc protrusion measures 7 mm. Transverse dimension of protruded portion of disc measures 27mm. Mild canal narrowing noted. AP diameter of dural sac measures 7.7 mm. Narrowing of right neural foramen. There is probable impingement of the exiting nerve root (sagittal T2 image 10). Narrowing of left neural foramen (sagittal T2 image 4).
L3-4: Broad- based central disc herniation is present. This results in compression and impingement upon the ventral thecal sac (axial T2 image 13, sagittal T1 and T2 image 8). AP diameter of disc protrusion measures 4 mm. Transverse dimension of protruded portion of disc measures 24 mm. AP diameter of dural sac measures 13.6 mm. Narrowing of right neural foramen. There is possible impingement of the exiting nerve root (sagittal T2 image 11). Narrowing of left neural foramen (sagittal T2 image 3).
L4-5: Broad- based central disc herniation is present. This results in compression and impingement upon the ventral thecal sac (axial T2 image 19, sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 6.5 mm. Transverse dimension of protruded portion of disc measures 26 mm. AP diameter of dural sac measures 8 mm. Narrowing of neural foramina bilaterally, left greater than right (sagittal T2 image 4 and 11).

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L5-S1: Right/paracentral disc herniation is present. This results in compression and impingement upon the ventral thecal sac (axial T2 image 23, sagittal T1 and T2 image 7). AP diameter of disc protrusion measures 4.6 mm. Transverse dimension of protruded portion of disc measures 25 mm. AP diameter of dural sac measures 13.5 mm. Narrowing of right neural foramen. There is probable impingement of the exiting nerve root (sagittal T2 image 11). Narrowing of left neural foramen (sagittal T2 image 3).

IMPRESSION:
Straightening of lumbar lordosis.
At L1-2, right/paracentral disc herniation is present resulting in compression and impingement upon the ventral thecal sac. Narrowing of left neural foramen. There is possible impingement of the exiting nerve root. Narrowing of right neural foramen
3. At L2-3, broad- based central disc herniation is present resulting in compression and impingement upon the ventral thecal sac. Narrowing of right neural foramen. There is probable impingement of the exiting nerve root. Narrowing of left neural foramen.
4. At L3-4, broad- based central disc herniation is present resulting in compression and impingement upon the ventral thecal sac. Narrowing of right neural foramen. There is possible impingement of the exiting nerve root. Narrowing of left neural foramen.
5. At L4-5, broad- based central disc herniation is present resulting in compression and impingement upon the ventral thecal sac. Narrowing of neural foramina bilaterally, left greater than right.
6. At L5-S1, right/paracentral disc herniation is present resulting in compression and impingement upon the ventral thecal sac. Narrowing of right neural foramen. There is probbable impingement of the exiting nerve root. Narrowing of left neural foramen

Digitally Signed By: Imam, Naiyer
Digitally Signed Date: 06/29/2022 12:14 AM