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COMMUNITY MEDICAL IMAGING

OF BROOKLYN

ACR Accredited Facility

2102 Ave Z • Brooklyn, NY 11235 • Tel: 718-455-4444 • Fax: 718-615-2121

LEONID LITOVSKIY, P.A. 1314 CONEY ISLAND AVENUE BROOKLYN, NY 11230

PATIENT: EVENS CASIMIR

DOB: 01/18/1957 DOS: 01/24/2022 CHART #: 24313

EXAM: MRI OF THE LUMBAR SPINE WITHOUT CONTRAST

HISTORY: Sharp pain.

TECHNIQUE: Multiplanar MR imaging of the lumbar spine was performed without contrast on Hitachi open MRI unit.

Sagittal and axial Tl weighted, sagittal STIR weighted and sagittal and axial T2 weighted images of the lumbar spine were obtained.

COMPARISON: None.

Additional sanitizing / safety protocols recommended by the CDC were performed.

FINDINGS: There is no fracture or listhesis. There are no endplate changes. The pars interarticularis is unremarkable. Posterior elements are symmetric. The musculature is unremarkable. There is no paraspinal abnormality. Retroperitoneum appears unremarkable.

Normal disc height is preserved diffusely. There is moderate straightening of the lumbar lordosis. The pedicles are intact. There is no stress reaction. The conus medullaris is unremarkable.

L1-L2: There is no central or foraminal stenosis.

L2-L3: There is no central or foraminal stenosis.

L3-L4: There is a disc bulge. There is no stenosis.

L4-L5: There is a diffuse disc bulge. A herniation is noted at the proximal left foramen.

L5-S1: There is a disc bulge.

Sacrum and SI joints are unremarkable.

The upper pelvis is unremarkable.



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IMPRESSION:

1. STRAIGHTENING OF THE LUMBAR LORDOSIS SUGGESTS PROMINENT SPASM.

2. DISC BULGES ARE SEEN AT THE L3-L4 THROUGH L5-S1 LEVELS. A HERNIATION IS NOTED AT THE PROXIMAL LEFT FORAMEN AT THE L4-L5 LEVEL.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 01/24/2022

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E-Sig By A. McDonnell, MD on 01/25/2022 06:47:34