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> DOS: 03/13/2020 DOB: 08/23/1967 FILE #: 35889 DOI: 01/31/2020

PATIENT: MCCARDY, DENZEL

EXAM: MRI OF THE LUMBAR SPINE W/O CONTRAST

Dear Dr. Creamar,

Your patient, Denzel McCardy, had an MRI of the lumbar spine performed without contrast on 03/13/2020.

HISTORY: Posttraumatic back pain.

TECHNIQUE: Multiplanar MR imaging of the lumbar spine was performed without contrast on the Esaote G-scan dedicated MRI unit. Sagittal T1, sagittal T2, axial T1 and axial T2 images of the lumbar spine were obtained.

FINDINGS: There is no fracture or destructive lesion. The normal lumbar lordotic curve is maintained. Normal lumbar vertebral body heights and marrow signal are seen. The conus, cauda equina and thecal sac are unremarkable. There is increased signal on the end plates at L4-L5. There are no significant osteoarthritic changes.

L1-L2: Disc maintains its normal configuration.

L2-L3: Disc maintains its normal configuration.

L3-L4: Disc maintains its normal configuration.

L4-L5: Central herniation of the disc impressing the anterior dural sac with annular tear demonstrated. There is desiccation of the disc. This disc extends considerably to the left extending into the lateral foraminal recess.

L5-S1: Prominent central hermiation impressing and distorting the thecal sac with annular tear demonstrated. Desiccation is seen.

## IMPRESSION:

1. CENTRAL HERNIATION OF THE L4-L5 DISC EXTENDS TO THE RIGHT EXTENDING INTO THE INTERVERTEBRAL FORAMEN. ANNULAR TEAR IS DEMONSTRATED. THERE IS DESICCATION OF THE DISC.



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- 2. PROMINENT HERNIATION OF THE L5-S1 DISC IMPRESSING AND DISTORTING THE THECAL SAC WITH ANNULAR TEAR DEMONSTRATED. THERE IS DESICCATION OF THE DISC.
- 3. INCREASED SIGNAL ON THE END PLATES AT L4-L5. FURTHER CLINICAL CORRELATION RECOMMENDED.

Thank you for referring this patient to us.

Jack Baldassare, M.D.

Diplomate, American Board of Radiology

JB/MT8 D: 03/13/2020

Job 35245