Nova Medical Diagnostic, PC

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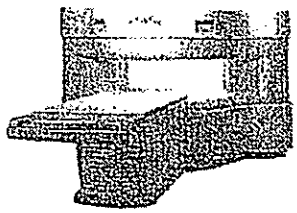

LEONID LITOVSKIY, PA
1314 CONEY ISLAND AVENUE
BROOKLYN, NY 11230

PATIENT: MEKHROZHIDIN SHARIPOV
DOB: 05/19/1969 DOS: 03/22/2021 CHART #: 3489
EXAM: MRI OF THE LUMBAR SPINE WITHOUT CONTRAST

HISTORY: Low back pain, stiffness increasing when standing or sitting for long period of time after motor vehicle accident.

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

Axial T2; sagittal T1, T2, and STIR images of the lumbar spine were obtained.

COMPARISON: None.

FINDINGS: The alignment and vertebral body height in the lumbar spine is preserved.

The signal from the bone is normal.

There is no bone marrow edema or bony lesions identified.

The conus medullaris ends at the L1-L2 intervertebral disc level, normal in signal and appearance.

The signal from the cauda equina is normal.

Paravertebral soft tissues are normal in appearance.

L1-L2, L2-L3, and L3-L4: No disc bulge or herniation, no spinal stenosis or neural foraminal narrowing.

L4-L5: Central and bilateral paracentral disc herniation causing mild spinal stenosis and moderate bilateral neural foraminal narrowing.

L5-S1: Central and bilateral paracentral disc herniation, left paracentral disc fissure causing mild-to-moderate bilateral neural foraminal narrowing, no spinal stenosis.

IMPRESSION:

1. L4-L5 CENTRAL AND BILATERAL PARACENTRAL DISC HERNIATION CAUSING MILD SPINAL STENOSIS AND MODERATE BILATERAL NEURAL FORAMINAL NARROWING.

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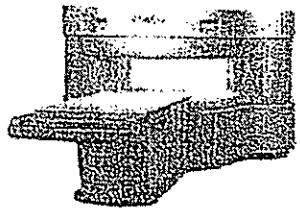

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EXAM: MRI OF THE LUMBAR SPINE WITHOUT CONTRAST
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2. L5-S1 CENTRAL AND BILATERAL PARACENTRAL DISC HERNIATION, LEFT PARACENTRAL DISC FISSURE CAUSING MILD-TO-MODERATE BILATERAL NEURAL FORAMINAL NARROWING, NO SPINAL STENOSIS.
3. INCIDENTALLY NOTED ARE RIGHT RENAL CYSTS, THE LARGEST MEASURING APPROXIMATELY 4 CM IN THE MID POLE

Thank you for referring this patient to us.

G Amoachi

Guenadi Amoachi, MD
Diagnostic Radiologist
Diplomate, American Board of Radiology

E-Sig By G. Amoachi, MD on 03/24/2021 10:00:59