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Lab No. : RJG221081867
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OPEN MRI LUMBOSACRAL SPINE

STUDY PROTOCOLS:

FLAIR T1W AND FAST SPIN ECHO T2W HIGH RESOLUTION SAGITTAL IMAGES OF LUMBOSACRAL SPINE WERE OBTAINED ON A DEDICATED PHASED ARRAY SURFACE SPINE COIL USING OPEN MRI TWIN GRADIENT SYSTEMS AND CORRELATED WITH T1W AND T2W AXIAL IMAGES.

FINDINGS:

In the position of imaging there is straightening of the lumbar spine.

Anterolisthesis L5 over S1 grade II.

The visualized lower spinal cord shows normal signal intensity.

Cord terminates at D12-L1 level.

Spondylotic changes are seen in the form of marginal osteophytes and disc desiccation at multiple levels. Otherwise, vertebral bodies are normal in height and marrow signal intensity.

At L1-2 and L2-3 levels disc desiccation is noted. No significant neural foramina and central canal narrowing is seen.

Diffuse disc bulge at noted at L3-4 and L4-5 and has the potential for impingement of bilateral exiting nerve roots at this level.

At L5-S1 level disco-osteophytic complex with retropulsion is noted causing compression of central canal. There is moderate narrowing of bilateral lateral recesses causing significant neural compression. There is impingement of bilateral exiting L5. There is no central canal narrowing is identified. There is bilateral facet arthropathy and mild hypertrophy of ligamentum flavum.

IMPRESSION: MR finding reveals:

✓ Anterolisthesis L5 over S1 grade II. Advise: NCCT LS spine to rule out any facet fracture.

- Lumbar spondylosis with multilevel disc degeneration and facet arthropathy.
- Compressive radiculopathy is more marked at L5-S1 levels with impingement of nerve roots as detailed above.

Advice: Clinical correlation.

*** End Of Report ***

In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.



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Scan to Validate Report



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