14 Pgs Received, 8 Pgs Transmitted
WIRL LUWIDAK SPINE WITHOUT IV CONTRAST NEURO [IMG11667]

Status: Final result

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## **All Reviewers List**

## James Michael Kipnis, MD on 5/20/2023 10:36

**Full Report** 

IMPRESSION:

Mildly bulging discs and degenerative changes at several levels as described. No significant canal estenosis or prominent neural foraminal narrowing.

ECLINICAL INDICATION: Lumbar radiculopathy.

ECHNIQUE: Multiplanar multisequence MRI of the lumbar spine was performed without the definition of intravenous contrast, according to standard protocol.

के OMPARISON: Images from the patient's MRI of 8/21/2008 not available in PACS at the time of this

**ALIGNMENT: The vertebral alignment is within normal limits.** 

/ERTEBRAE: The marrow signal is benign. Vertebral body height is maintained.

Signature is maintenance of lumbar disc space height and hydration.

ONUS MEDULLARIS AND CAUDA EQUINA: The conus medullaris terminates at L2. The nerve roots of the cauda equina are unremarkable.

ARAVERTEBRAL SOFT TISSUES AND VISUALIZED RETROPERITONEUM: There is no significant nding.

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EVALUATION OF INDIVIDUAL LEVELS:

- L1-2: There is no significant canal stenosis or neural foraminal narrowing.
- L2-3: There is no significant canal stenosis or neural foraminal narrowing.
- L3-4: There is mild facet hypertrophy. There is no significant canal stenosis or neural foraminal narrowing.
- L4-5: There is a mild disc bulge. Mild facet hypertrophy is present. There is no significant canal stenosis or neural foraminal narrowing.
- L5-S1: There is a mild disc bulge. Bilateral facet hypertrophy is present. There is no significant canal stenosis or neural foraminal narrowing.

SLIMITED EVALUATION OF UPPER SACRUM AND SACROILIAC JOINTS: Unremarkable.

Electronic Signature: I personally reviewed the images and agree with this report. Final Report:
Dictated by and Signed by Attending Barbara L Eisenkraft MD 5/19/2023 4:23 PM

Pe 10/18/13