HI-TECH
MRI & CBCT CENTRE
Wright Town, JABALPUR (M.P.).
Phone : 0761 - 4000003, 4000006, 4009000

Patient Name	:SESHMANI	Patient ID	:971
Sex / Age	:M/38Y	Report Date/Time	:03-08-2016 18:52:57
Modality	:MR	Ref. Phys.	: DR. RAJESH PATEL,DM

M.R.I. OF THE LUMBAR SPINE

MRI was performed on a ***1.5 TESLA whole body MRI Scanner.*** *Sagittal T1 & TSE T2 weighted scans of the lumbar spine were studied and these were correlated with axial images. Additional T2 weighted sagittal screening images of the cervico-dorsal spine and coronal STIR images of the sacroiliac joints were also obtained.*

There is straightening of curvature of the lumbar spine.
The lumbar vertebrae are normal in height, alignment and marrow signal characteristics.
There are degenerative spondylotic changes in the lumbar spine with marginal end plate osteophytes and desiccated intervertebral discs displaying hypointense signal on T2 weighted images.
There is right extraforaminal disc protrusion at L3-4 level causing mild narrowing of the extraforaminal region with mild impingement of the right exiting L3 nerve root.
There is central disc protrusion at L4-5 level causing stenosis of the lateral recesses and central canal with compression of the bilateral traversing L5 and cauda equina nerve roots.
There is central disc protrusion at L5-S1 level indenting the anterior thecal sac without overt nerve root impingement.
The lumbar discs are normal in height and signal intensity. No significant disc herniation is seen in the lumbar spine causing thecal sac indentation or foraminal narrowing. The exiting nerve roots in the lumbar region appear normal.
No evidence of developmental bony spinal canal stenosis is seen on this study.
Pre & paravertebral soft tissues are unremarkable. The visualized cord is normal in signal intensity and morphology. Conus is normal in position and signal intensity.
STIR coronal sections of the sacroiliac joints appear unremarkable.
Screening images of the cervico-dorsal spine reveal normal vertebral height & alignment. Posterior disc bulges are seen at C3-4,C4-5 ,C5-6 and C6-7 levels indenting the anterior thecal sac

CARE
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IMPRESSION:

- *Right extraforaminal disc protrusion at L3-4 level causing mild narrowing of the extraforaminal region with mild impingement of the right exiting L3 nerve root.*
- *Central disc protrusion at L4-5 level causing stenosis of the lateral recesses and central canal with compression of the bilateral traversing L5 and cauda equina nerve roots.*
- *Central disc protrusion at L5-S1 level indenting the anterior thecal sac without overt nerve root impingement.*

Dr. Pankaj Narekar, MD
Consultant Radiologist