

Patient Name	: Mr.ASHFAQ	Visit No	: CHA250034043
Age/Gender	: 51 Y/M	Registration ON	: 25/Feb/2025 01:40PM
<b>Lab No</b>	<b>: 10131339</b>	Sample Collected ON	: 25/Feb/2025 01:40PM
Referred By	: Dr.VINOD TIWARI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 25/Feb/2025 05:24PM

## **MRI: LUMBO-SACRAL SPINE**

### **IMAGING SEQUENCES (NCMR)**

**AXIAL:** T1 & TSE T2 Wis. **SAGITTAL:** T1 & TSE T2 Wis **CORONAL:** T2

Lumbar spine is straightened with loss of usual spinal curvature. There is evidence of degenerative changes affecting lumbar spine. L3-4 & L5-S1 intervertebral discs are desiccated. Vertebrae are also showing degenerative changes in form of anterior osteophytosis and signal changes adjacent to end plates.

Mild posterior disc bulge is seen at L5-S1 level causing mild indentation over thecal sac without significant compromise of lateral recess and neural foramina (AP thecal sac diameter 13mm).

Rest of the vertebrae and intervertebral disc are showing normal height, morphology, outline, alignment and signal intensity. No significant disc bulge/herniation or compression over thecal sac/nerve roots at any other level.

Lower dorsal spinal cord and conus medullaris are showing normal morphology, outline and signal intensity. Cord CSF interface is normally visualized.

Facet joints and ligamentum flavum are normal.

Pre and para vertebral soft tissues are normal.

Irregularity & sclerosis is seen in articular margins of both sacroiliac joints.

**Screening of rest of the spine** was done which reveals small disc bulges at C3-4, C4-5 & C5-6 levels.

## **IMPRESSION**

- **Degenerative changes affecting lumbar spine disc bulge at L5-S1 level.**
- **Bilateral sacroiliitis.**

Please correlate clinically.

**DR. RAVENDRA SINGH**  
**MD**

Typed by Ranjeet

\*\*\* End Of Report \*\*\*

