Patient Name	: Ms.PRAVEEN BANO	Visit No	: CHA250037158
Age/Gender	: 52 Y/F	Registration ON	: 01/Mar/2025 02:58PM
Lab No	: **10134454**	Sample Collected ON	: 01/Mar/2025 02:58PM
Referred By	: Dr.MASROOR AHMAD**	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 01/Mar/2025 07:07PM

MRI: LUMBO-SACRAL SPINE

IMAGING SEQUENCES (NCMR)
AXIAL:** T1 & TSE T2 Wis.* ***SAGITTAL: *T1 & TSE T2 Wis* ***CORONAL:*** *T2*

There is evidence of patchy altered signal intensity and bony erosions involving L3 and L4 vertebrae. Affected osseous elements are displaying hyperintense signal on T2 W images and hypointense signal on T1 W images.

Small associated left paravertebral collection is seen at L3-4 level. No intraspinal soft tissue component is seen.

Moderate size left psoas abscess is seen, measuring approx 98x 44x 34mm.

Diffuse disc bulge is seen at L4-5 level producing mild compromise of bilateral lateral recesses with mild extradural compression over thecal sac.

Spinal cord is showing normal MR morphology and signal intensity pattern. Cord CSF interface is normally visualized.

Rest of the vertebrae, intervertebral discs and neural foramina are showing normal MR morphology and signal intensity pattern. No significant disc bulge/herniation or compression over thecal sac/spinal cord is seen at other levels.

Bilateral sacroiliac joints appear normal in the visualized sections.

Screening of rest of the spine was done which reveals no significant abnormality.

IMPRESSION

Patchy altered signal intensity and bony erosions involving L3 and L4 vertebrae with associated soft tissue component & left psoas abscess as described — infective etiology (? Pott's spine).

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Typed by Ranjeet

*** End Of Report ***

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