

Patient Name	: Ms. SADIYA BANO	Visit No	: CHA250038781
Age/Gender	: 20 Y O M O D /F	Registration ON	: 04/Mar/2025 10:44AM
Lab No	: 10136076	Sample Collected ON	: 04/Mar/2025 10:44AM
Referred By	: Dr. VINOD TIWARI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 04/Mar/2025 07:21PM

MRI: DORSAL SPINE

IMAGING SEQUENCES (NCMR)

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

There is evidence of diffusely altered signal intensity and bony destruction are seen involving D7, D8 & D9 vertebrae. Intervening intervertebral disc (D8-9) is also involved in the disease process. Affected osseous elements are displaying hyperintense signal on T2 W images and hypointense signal on T1 W images. Severe collapse of D8 vertebral body is noted with anterior kyphotic deformity.

Moderate to large sized associated prevertebral and bilateral paravertebral collection is seen extending from D7 to D9 levels, maximum thickness approx 22mm. Moderate size intraspinal soft tissue collection is seen extending from D7 to D9 producing moderate compromise of bilateral lateral recesses with moderate to severe extradural compression over thecal sac with subtle compressive myelopathic changes.

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.

Screening of rest of the spine was done which reveals disc bulge at L5-S1 level.

IMPRESSION

Altered signal intensity and bony destruction involving D7, D8 & D9 vertebrae with associated soft tissue collections — likely Pott's spine.

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Typed by Ranjeet

*** End Of Report ***

