

Patient Name : Ms.NEETU GUPTA Visit No : CHA250040680
Age/Gender : 34 Y/F Registration ON : 06/Mar/2025 03:53PM
Lab No : 10137975 Sample Collected ON : 06/Mar/2025 03:53PM
Referred By : Dr.NORTHERN RAILWAY Sample Received ON :
Refer Lab/Hosp : NORTHERN RAILWAY LKO Report Generated ON : 06/Mar/2025 05:56PM

MRI: LUMBO-SACRAL SPINE

IMAGING SEQUENCES (NMR)

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

There is transitional vertebra at lumbo-sacral junction which is considered as **sacralized** L5 vertebra with rudimentary disc at L5-S1 level (counting done from C1 level downwards).

Lumbar spinal curvature is straightened. L4-5 disc is desiccated. Vertebral bodies are showing normal height, alignment and marrow signal intensity pattern.

Diffuse disc herniation (protrusion) is seen at L4-5 level producing moderate compromise of bilateral lateral recesses with mild extradural compression over thecal sac (AP thecal sac diameter 8.5mm).

Rest of the 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.

Rest of the thecal sac with spinal cord including conus medullaris and cauda equina are showing normal MR morphology and signal intensity pattern. No evidence of primary canal stenosis.

Facet joints and ligamentum flavum are normal.

Pre and para vertebral soft tissues are normal.

Bilateral sacroiliac joints appear normal in the visualized sections.

Screening of rest of the spine was done which reveals small disc bulges at C5-6 and C6-7 levels.

IMPRESSION

- **Disc herniation at L4-5 level.**

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Transcribed by Priyanka...

*** End Of Report ***

