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CMO Reg. No. RMEE 2445133 NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name Age/Gender

: Ms.SHIVANI

Visit No

: CHA250041080

: 22 Y/F

Registration ON

: 07/Mar/2025 11:26AM

Lab No

: 10138375

Sample Collected ON

: 07/Mar/2025 11:26AM

Referred By

: Dr.B HOPE HOSPITAL **

Sample Received ON

Refer Lab/Hosp

: CHARAK NA

Report Generated ON

: 07/Mar/2025 04:05PM

MRI: LUMBO-SACRAL SPINE

IMAGING SEQUENCES (NCMR)

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

There is transitional vertebra at lumbo-sacral junction which is considered as *lumbarized* S1 vertebra with rudimentary disc at S1-2 level (counting done from C1 level downwards).

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

End plate irregularity and fatty marrow changes are seen at D10-11 and L4-5 vertebral levels. Small lytic lesions are seen at inferior end plate of D10 and L4 vertebral bodies, showing subtle STIR hyperintensity. No evidence of associated soft tissue component is seen.

Diffuse disc bulge is seen at L4-5 level producing mild compromise of bilateral lateral recesses with mild extradural compression over the al sac (AP the al sac diameter 12mm).

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 no significant abnormality.

IMPRESSION

- End plate irregularity and fatty marrow changes at D10-11 and L4-5 vertebral levels with small lytic lesions and subtle STIR hyperintensity at inferior end plate of D10 and L4 vertebral bodies--? healed Pott's spine. Adv: Contrast study.
- Disc bulge at L4-5 level.

Please correlate clinically.

DR. RAVENDRA SINGH

MD

Transcribed by Priyanka...

*** End Of Report ***

