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

Patient Name	: Mr.GURU SHANKAR VERMA	Visit No	: CHA250043455
Age/Gender	: 47 Y/M	Registration ON	: 10/Mar/2025 08:39PM
Lab No	: 10140750	Sample Collected ON	: 10/Mar/2025 08:39PM
Referred By	: Dr.MANU RASTOGI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 11/Mar/2025 02:29PM

MRI: CERVICAL SPINE

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

Cervical spine is straightened with loss of usual spinal curvature. There is evidence of degenerative changes affecting cervical spine. All the visualized intervertebral discs are dessicated. Vertebrae are also showing degenerative changes in form of anterior osteophytosis at multiple levels.

Mild posterior disc bulges are seen at C4-5 and C6-7 levels causing mild indentation over thecal sac without significant compromise of lateral recess and neural foramina.

Right paracentral disc herniation (protrusion) is seen at C5-6 level producing moderate compromise of right lateral recess with moderate extradural compression over thecal sac.

Rest of the thecal sac with rest of the spinal cord is normal in signal intensity and configuration. Cord CSF interface is normally visualized. No intramedullary or intradural pathology is seen.

No evidence of any osseous or soft tissue anomaly at cranio-vertebral junction.

Pre and para-vertebral soft tissues are normal.

AP thecal sac diameter at disc level measures:

$C_{2,2}$	C3-4	C4-5	C5-6	C6-7	C7-D1
11mm	8.9mm	8.2mm	7.5mm	8.4mm	9.8mm

Screening of rest of the spine was done which reveals small disc bulge at L2-3 level.

IMPRESSION:

• Degenerative changes affecting cervical spine with disc bulges at C4-5, C5-6 and C6-7 levels.

Please correlate clinically.

DR. RAVENDRA SINGH MD

Transcribed by R R...

