

Patient Name	: Ms.BITOLI DEVI	Visit No	: CHA250044698
Age/Gender	: 60 Y/F	Registration ON	: 12/Mar/2025 02:39PM
<b>Lab No</b>	<b>: 10141993</b>	Sample Collected ON	: 12/Mar/2025 02:39PM
Referred By	: Dr.MUDIT SINHA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 12/Mar/2025 07:48PM

## **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 bulge is seen at C3-4 level causing mild indentation over thecal sac without significant compromise of lateral recess and neural foramina (AP thecal sac diameter 8.9mm).

Disc osteophyte complex is noted at C5-6 & C6-7 levels producing mild compromise of bilateral lateral recesses and neural foraminae with mild extradural compression over thecal sac (AP thecal sac diameter 8.6mm & 8.7mm).

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.

*Screening of rest of the spine was done which reveals degenerative changes with disc bulges at L3-4, L4-5 & L5-S1 levels.*

*Moderate collapse with anterior wedging of D12 vertebral body is noted – ? old post traumatic.*

## **IMPRESSION**

**Degenerative changes affecting cervical spine with disc bulge at C3-4 level and disc osteophyte complex at C5-6 and C6-7 levels.**

Please correlate clinically.

**DR. RAVENDRA SINGH**  
**MD**

Typed by Ranjeet



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**CT STUDY OF HEAD**

**Posterior Fossa**

- Cerebellopontine angle and prepontine cisterns are seen normally.
- Fourth ventricle is normal in size and midline in location.
- Cerebellar parenchyma and brain stem appears to be normal.

**Supratentorial**

- Cortical sulci are prominent.
- Large hypodense area is seen in right parieto-occipital region. No evidence of fresh bleed is seen.
- Small hypodense areas are seen in left frontal ,right thalamic and left basal ganglionic regions .
- Basal cisterns are seen normally.
- Third and both lateral ventricles are prominent. Paraventricular white matter hypodensities are seen .
- No midline shift is seen.

**IMPRESSION:**

**LARGE ACUTE RIGHT PARIETO-OCCIPITAL INFARCT.  
SMALL LEFT FRONTAL ,LEFT BASAL GANGLIONIC AND RIGHT THALAMIC INFARCTS OF DIFFERENT AGES.  
DIFFUSE CEREBRAL ATROPHY WITH WHITE MATTER ISCHAEMIC CHANGES.**

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

transcribed by: anup

\*\*\* End Of Report \*\*\*

