

Patient Name	: Ms.MALTI DEVI	Visit No	: CHA250045026
Age/Gender	: 85 Y/F	Registration ON	: 13/Mar/2025 10:04AM
Lab No	: 10142321	Sample Collected ON	: 13/Mar/2025 10:04AM
Referred By	: Dr.MANISH MAURYA	Sample Received ON	:
Refer Lab/Hosp	: CGHS (BILLING)	Report Generated ON	: 13/Mar/2025 10:36AM

SKIAGRAM CERVICAL SPINE AP AND LATERAL VIEW

- Anterior & posterior osteophytes are seen arising from C4-C6 cervical vertebrae.
- Intervertebral disc spaces are maintained.
- Posterior elements are seen normally.
- No cervical rib is seen.
- No CVJ anomaly is seen.

IMPRESSION:

- **CERVICAL SPONDYLOSIS.**

Clinical correlation is necessary.

[DR. JAYENDRA KUMAR, MD]

Transcribed by Gausiya

CHARAK



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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.
- Hypodense area is seen in left posterior parietal region .Small hypodense areas are seen in bilateral basal ganglionic regions . No evidence of fresh bleed is seen.
- Basal cisterns are seen normally.
- Third and both lateral ventricles are prominent. Paraventricular white matter hypodensities are seen .
- No midline shift is seen.

IMPRESSION:

AREA OF GLIOSIS IN LEFT POSTERIOR PARIETAL REGIONSEQUELAE OF OLD C.V.A.
BILATERAL BASAL GANGLIONIC AND 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 ***

