

Patient Name : Mr. CHAUDHARY RANVIJAY SINGH Visit No : CHA250046788
Age/Gender : 35 Y/M Registration ON : 17/Mar/2025 10:22AM
Lab No : 10144083 Sample Collected ON : 17/Mar/2025 10:22AM
Referred By : Dr. SANJAY Sample Received ON :
Refer Lab/Hosp : CHARAK NA Report Generated ON : 17/Mar/2025 12:56PM

MRI: LUMBO-SACRAL SPINE

IMAGING SEQUENCES (NCMR)

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

Lumbar spinal curvature is straightened. L4-5 and L5-S1 discs are desiccated. Vertebral bodies are showing normal height, alignment and marrow signal intensity pattern.

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

Right paracentral disc herniation (extrusion with inferior migration) is seen at L5-S1 level producing severe compromise of right lateral recess with impingement of right S1 traversing nerve root with mild extradural compression over thecal sac (AP thecal sac diameter 8.5mm).

Rest of the thecal sac with spinal cord including conus medullaris is normally visualized.

Facet joints and ligamentum flavum are normal.

Pre and para vertebral soft tissues are normal.

Bilateral sacroiliac joints are normally visualized.

Screening of rest of the spine was done which reveals small disc bulges at C5-6 and C6-7 levels. Small linear intramedullary T2 hyperintensity is noted in the dorsal spinal cord extending from D6-7 level — syrinx.

IMPRESSION:

- **Disc herniation at L5-S1 level and disc bulge at L4-5 level.**

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Transcribed by R R...

*** End Of Report ***

