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PROCEDURE : MRI CERVICAL SPINE WITH SCREENING OF WHOLE SPINE

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Protocol: MR imaging of the cervical spine in a 1.5 T scanner was performed by taking sagittal & axial T1 & T2W sequences with a T2W fat suppression sagittal & coronal STIR sequence using a phased array surface coil.

There is straightening of cervical curvature with disc desiccations at all levels. Osteophytic lippings are seen with PLL thickening against lower part of C3 to upper part of C7 vertebra causing relative canal narrowing.

Diffuse asymmetrical posterior disko-osteophytic herniation is seen at C4-C5 level showing small central sub-ligamentous extruded disc component causing ventral thecal sac indentation and respective foal cord contouring without altered cord signal intensities. No IV foraminal encroachment or nerve root impingement is noted.

Diffuse posterior disko-osteophytic herniations with focal central bulges are seen at C3-C4, C5-C6 & C6-C7 levels causing mild indentation over thecal sac. No nerve root impingement are seen at these levels.

Vertebral bodies and appendages show normal signal intensities. Atlanto-axial joint appears normal. Cervical cord shows normal signal intensities. CSF shows normal signal intensities. Cervico-medullary junction is normal. No para vertebral mass seen.

T2 screening of the thoraco-lumbar spine shows maintained thoraco-lumbar curvature with mild early disc dehydration at L5-S1 level.

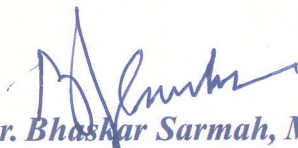
Mild diffuse disc herniation is seen at L5-S1 level causing canal and bilateral IV foraminal encroachment and indentation over ventral epidural fat and mild impingement on bilateral L5 exiting nerve roots.

No dorsal disc herniation is seen. Cord shows normal signal intensities.

IMPRESSION: MRI study of cervical spine reveals:

- Diffuse asymmetrical posterior disko-osteophytic herniation at C4-C5 level showing small central sub-ligamentous extruded disc component causing ventral thecal sac indentation and respective foal cord contouring without altered cord signal intensities. No IV foraminal encroachment or nerve root impingement is noted.
- Diffuse posterior disko-osteophytic herniations with focal central bulges at C3-C4, C5-C6 & C6-C7 levels causing mild indentation over thecal sac. No nerve root impingement are seen at these levels.

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