GOYAL MRI & DIAGNOSTIC CENTRE

B-1/12, SAFDARJUNG ENCLAVE, NEW DELHI – 110029
Phone: 40771234, 26107559 E-mail: goyalmri@yahoo.com

Dr. Ankur Gadodia
MD (AIIMS), DNB, FRCR

Dr. Pranay R Kapur
MBBS, DNB

16.03.2024

MS. BUSHRA, 25 YRS / F **UID: 03.24.0711**

M.R.I. OF CERVICAL SPINE

Sagittal T1 & FSE T2 weighted scans of the cervical spine were studied and these were correlated with axial images on a GE Pioneer 3.0 Tesla MRI scanner.

Cervical curvature is kyphotic. Scoliosis of the cervical spine with convexity towards right side is noted.

There is grade-I retrolisthesis of C3 over C4 and C4 over C5 vertebrae.

Broad based posterocentral disc protrusions are seen at C3-4 and C4-5 levels causing compression on the thecal sac and causing mild narrowing of bilateral neural foramina.

Diffuse disc bulge is seen at C5-6 level causing compression on the thecal sac.

At other disc levels, cervical intervertebral foramina appear adequately capacious.

Height of cervical vertebrae is maintained.

Cervical cord displays normal parenchymal signal intensities.

The atlanto-Odontoid space and atlantoaxial joint is unremarkable.

IMPRESSION:

1. **Grade-I retrolisthesis of C3 over C4 and C4 over C5 vertebrae.**
2. **Broad based posterocentral disc protrusions at C3-4 and C4-5 levels causing compression on the thecal sac and causing mild narrowing of bilateral neural foramina.**
3. **Diffuse disc bulge at C5-6 level causing compression on the thecal sac.**

Clinical correlation is necessary

DR. ANKUR GADODIA
MD (AIIMS), DNB, FRCR (UK)

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M.R.I. OF THE DORSAL SPINE

Sagittal T1 & T2 weighted scans of the dorsal spine were studied and these were correlated with axial T1 & FSE T2 weighted images.

Thoracic kyphosis is maintained.

Syrinx is seen in the cord posterior to the bodies of D6 to D9 vertebral level.

Height and alignment of dorsal vertebrae is maintained.

No disc herniation / bulge is seen compressing the thecal sac.

Dorsal intervertebral foramina appear adequately capacious.

Bilateral paraspinal muscles are unremarkable.

IMPRESSION:

- **Syrinx in the cord posterior to the bodies of D6 to D9 vertebral level.**

Clinical correlation is necessary

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M.R.I. OF THE LUMBOSACRAL SPINE

Sagittal T1 & FSE T2 weighted scans of the lumbosacral spine were studied and these were correlated with axial T1 & FSE T2 weighted images.

Lumbar lordosis is maintained.

Diffuse disc bulge is seen at L5-S1 level causing compression on the thecal sac.

At other disc levels, thecal sac containing cauda equina and lumbar intervertebral foramina appear adequately capacious.

Height and alignment of lumbar vertebrae is maintained.

Lower end of the spinal cord displays uniform parenchymal signal intensities.

Paravertebral psoas muscles are unremarkable.

IMPRESSION:

- **Diffuse disc bulge at L5-S1 level causing compression on the thecal sac.**

Clinical correlation is necessary

DR. ANKUR GADODIA
MD (AIIMS), DNB, FRCR (UK)