

## MRI Lumbar Spine

## Sample Report

PATIENT: DOE, REGINA  
DATE OF BIRTH: 1/4/1967  
REFERRING PHYSICIAN: BANNER, ROSS, MD  
EXAM DATE: 1/1/2013

PATIENT ID: 146713

### EXAMINATION: MRI Lumbar Spine

**INDICATION:** Chronic low back pain, right lower extremity pain, radiculopathy.

**TECHNIQUE:** Magnetic resonance imaging of the lumbosacral spine is submitted with standard protocol, sagittal and axial T1, T2 and/or gradient echo sequences, without IV contrast. Exam performed on 1.5 Tesla MRI system.

**COMPARISON:** None

**FINDINGS:** There is normal lumbosacral vertebral body height and alignment on this supine, non-weight bearing exam. Vertebral body marrow signal is normal. The conus medullaris is normal and terminates at L1.

T12-L1: Sagittal series-mild secondary discogenic facet change without stenosis.

L1-L3: Sagittal series-normal disc spaces with patent canal and foramina.

L3-L4: Series 6 image 10-normal disc space show mild/moderate facet arthrosis with patent canal and foramina.

L4-L5: Image 21-mild to moderate decreased disc signal and disc height with mild endplate spondylitic change, bulge and a left paracentral disc herniation extruded superiorly, 7 mm AP by 16 mm mL by 14 mm CC, with the left L5 nerve root sleeve impingement in the lateral recess, with severe right more than left facet arthrosis. Narrowing of the thecal sac, 8 mm, with mild left lateral recess stenosis, patent right lateral recess and mild to moderate left and mild right foraminal stenosis.

L5-S1: Image 32-mild decreased disc signal with mild/moderate decreased disc height and endplate spondylitic change, bulge and left paracentral disc herniation, 3 mm AP by 8mm mL, with left S1 nerve root sleeve impingement in the lateral recess, with moderate facet arthrosis. Patent canal and right lateral recess and right foramen with minor left foraminal stenosis. No paraspinal masses or collections.

### IMPRESSION:

1. L4-L5 left paracentral disc herniation extruded superiorly with left L5 nerve root sleeve impingement, with canal, lateral recess and foraminal stenosis.
2. L5-S1 left paracentral disc herniation with left S1 nerve root sleeve impingement with left lateral recess and foraminal stenosis.

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**JE Gale**



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