

AMRADNET

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Radiology Report

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Patient Name	Date of Birth	Facility
JANE DOE	XX/XX/XXXX	TEST FACILITY
Referring Physician	Faxed To	
SMITH	1.877.267.2348	
Exam Requested		
MRI SPINE CERVICAL WITHOUT CONTRAST		
Indication	Date	
PAIN IN UPPER BACK AND TINGLING IN FINGERS	5/14/2012	
Exam Date	Report Date	
5/14/2012	5/14/2012	

Accession: 231541

Clinical History: PAIN IN UPPER BACK AND TINGLING IN FINGERS.

Comparison: NONE

Examination: MRI SPINE CERVICAL WITHOUT CONTRAST

Technique: Sagittal T1, T2, Stir, Axial T1 and T2 images of the cervical spine were performed.

Findings: The alignment and vertebral body heights are maintained. The moderately decreased disc space is present at C5-C6 level with multilevel disc desiccation. There is a straightening of normal lordosis. The bone marrow signal is unremarkable. No abnormal signal is present in the spinal cord. The posterior elements are aligned. Cervicomedullary junction is unremarkable.

C2-C3: The central canal is adequate. The bilateral neuroforamina are patent.

C3-C4: The right paracentral disc protrusion is present with osteophyte complex formation. The disc material extends into the central canal about 5 mm on the right side. The uncovertebral hypertrophy is present. The bilateral neuroforamina are mildly-to-moderately narrowed. The central canal is 11 mm.

C4-C5: Posterior left paracentral disc protrusion is present. The disc material extends into the central canal about 4 mm. The central canal is 12 mm. The bilateral uncovertebral hypertrophy is present. The bilateral neuroforamina are moderately narrowed.

C5-C6: Posterior broad based disc bulging and osteophyte complex are present. The disc material and osteophyte complex extend into the central canal about 3 mm. The central canal is 8 mm in AP dimension. Bilateral uncovertebral hypertrophy is present. Bilateral neuroforamina are severely narrowed.

C6-C7: Left paracentral disc protrusion is present. The disc material extends into the central canal about 4 mm with posterior annular fissure. The central canal is 12 mm. The bilateral neuroforamina are moderately narrowed due to uncovertebral hypertrophy.

C7-T1: Unremarkable.

Impression:

1. Degenerative disease with moderate disc space narrowing at C5-C6 level with multilevel disc desiccation and osteophyte formation.
2. Multilevel disc disease, the central canal is narrowed at C5-C6 level to 8 mm in AP dimension.
3. Multilevel paracentral disc protrusion is present; the posterior annular fissure is present at C6-C7 level.
4. Multilevel neuroforamina narrowing is present from mild-to-moderate as well as severe degree from C3-C4 to C6-C7 level.

Expert Physician, MD
ELECTRONICALLY SIGNED

Transcribed by: VS
Reviewed by: HR

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