

# FOCUS IMAGING & RESEARCH CENTRE PV



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## INTRODUCTION OF THE ALL NEW STATE OF ART PET-CT SUITE

PET-CT SUITE / MRI 3T / CARDIAC CT / 4D ULTRASOUND / COLOR DOPPLER / ECHO / TMT / DIGITAL X-RAY / MAMMOGRAPHY / BMD / EEG / EMG / NCV / VEP / ECG / LABORATORY MEDICINE

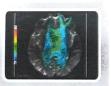


















Focus Helpline Numbers:

Permanent ID:

Registration No.: 101846075 Patient Name:

Mrs. NINA SAGAR 57 Yrs Female

ID Card No.:

Age/Sex:

Referred By: Dr. A K Singh Referring Hosp.: Fortis Hospital Mobile No. 9899062680 Registration Dt./Tm.: 01/08/2018 15:38:02

Report Dt./Tm.: 01/08/2018 17:05:36 01/08/2018 17:05:37 Validation Dt./Tm.:

01/08/2018 17:05:41 Printed Dt./Tm.:

#### MRI LUMBOSACRAL SPINE

#### **STUDY PROTOCOLS:**

SPIN ECHO T1W AND FAST SPIN ECHO T2W HIGH RESOLUTION SAGGITAL IMAGES OF LUMBOSACRAL SPINE WERE OBTAINED ON A DEDICATED PHASED ARRAY SURFACE SPINE COIL USING 3.0 TESLA TWIN GRADIENT SYSTEMS AND CORRELATED WITH T2W AXIAL IMAGES.

#### **FINDINGS:**

Lumbar lordosis is straightened.

L2 vertebral body hemangioma is seen. Marginal osteophytes are noted in L1 to L5. Disc desiccations are noted in L1/2 to L4/5. Schmorl's nodes are noted in L1 and L2.

Vertebral bodies are normal in height, intensity and alignment.

Diffuse disc bulge is seen at L2/3 level indenting the thecal sac and bilateral traversing nerves (grade I). Bilateral facet joint hypertrophy is seen.

Diffuse disc bulge with propensity to left is seen at L3/4 level indenting the thecal sac and bilateral descending L4 nerves (Grade II on right and grade III on left). Bilateral facet joint hypertrophy is seen.

Diffuse disc bulge is seen at L4/5 level indenting the thecal sac and bilateral descending L5 nerves (grade III). Bilateral facet joint hypertrophy is seen.

Diffuse disc bulge is seen at L5/S1 level indenting the thecal sac and compressing bilateral descending S1 nerves (grade I). Bilateral facet joint hypertrophy is seen.

Bony canal is capacious at all levels with no obvious primary canal stenosis. Distal cord, conus medullaris and filum terminale are normal in MR morphology. Pre and paravertebral soft tissues are normal. Posterior spinal elements are normal.

FOCUS... HEALTHCARE REYOND IMAGINATION CO. 10, Green Park Extension, New Delhi-16 (MRI @ 3 Tesla, General Radiology Division) Corporate Office & H-10 , Green Park Extension, New Delhi-16 (PET-CT, MRI @ 3 Tesla, General Radiology Division, Cardiac CT Scan) Diagnostic Facilities: Laboratory Medicine Hub: 7/1-4, Yusuf Sarai Market, Aurobindo Marg, New Delhi-16 (Laboratory Medicine Division)

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ON PANEL: CGHS, ESI, MCD, ECHS, DGEHS









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#### DIAGNOSIS:

#### MR IMAGING OF LUMBOSACRAL SPINE REVEALS:-

- L2 vertebral body hemangioma is seen.
- Marginal osteophytes are noted in L1 to L5.
- Disc desiccations are noted in L1/2 to L4/5.
- Schmorl's nodes are noted in L1 and L2.
- Diffuse disc bulge is seen at L2/3 level indenting the thecal sac and bilateral traversing nerves (grade I). Bilateral facet joint hypertrophy is seen.
- Diffuse disc bulge with propensity to left is seen at L3/4 level indenting the thecal sac and bilateral descending L4 nerves (Grade II on right and grade III on left). Bilateral facet joint hypertrophy is seen.
- Diffuse disc bulge is seen at L4/5 level indenting the thecal sac and bilateral descending L5 nerves (grade III). Bilateral facet joint hypertrophy is seen.
- Diffuse disc bulge is seen at L5/S1 level indenting the thecal sac and compressing bilateral descending S1 nerves (grade I). Bilateral facet joint hypertrophy is seen.

ADVISED: CLINICAL CORRELATION.

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Page No: 2 of 2