

Exam Date: 06/20/2005

MR OF LUMBAR SPINE: 6/20/05.

COMPARISON: None

CLINICAL HISTORY: 41 year old man, rule out herniated disk.

TECHNIQUE: MRI of the lumbar spine was performed, including three plane localizer, sagittal T1, sagittal T2 with fat sat, sagittal T1 with fat sat post-gadolinium, axial T1, axial T1 with fat sat post-gadolinium.

FINDINGS: Disc desiccation is identified at L2-L3, L4-L5, and L5-S1. Annular tears are identified at L2-L3 and L5-S1. Small Schmorl's nodes are identified from T12 through L3. Modic-type 1 change is identified at L2-L3 and L4-L5. Normal bone marrow signal intensity is seen elsewhere. Alignment of the lumbar vertebral bodies is intact. The tip of the conus medullaris is not well visualized. Normal signal intensity is identified in the cauda equine nerve roots. The visualized paraspinal soft tissues are grossly unremarkable.

FINDINGS AT SPECIFIC LEVELS:

L1-L2: Unremarkable.

L2-L3: There is some mild broad-based disk bulge causing mild central canal stenosis and bilateral neuroforaminal stenosis. An annular tear is present. The right exiting L2 nerve root is in close proximity to the disk bulge. Mild facet hypertrophy is present.

L3-L4: There is a broad-based disk bulge with mild bilateral neuroforaminal stenosis. No evidence of central canal stenosis or nerve root impingement. Facet hypertrophy is seen.

L4-L5: There is a broad-based disk bulge causing moderate central canal stenosis and moderate bilateral neuroforaminal narrowing inferiorly. The bilateral exiting L4 nerve roots contact the disk bulge. Facet hypertrophy is also noted.

L5-S1: There is a large right pericentral disk extrusion with an annular tear. The disk extrusion pushes the right S1 nerve root posteriorly and also pushes the thecal sac slightly to the left. Moderate central canal stenosis is identified at this level.

IMPRESSION:

1. L5-S1 annular tear and a large right pericentral disk extrusion which pushes the right S1 nerve root posteriorly and pushes the thecal sac slightly to the left. Moderate central canal stenosis is present at this level.
2. Broad-based disk bulge at L4-L5 with moderate central canal and bilateral neuroforaminal stenosis. The bilateral exiting L4 nerve roots contact the disk.
3. Broad-based disk bulge at L2-L3 with an annular tear and mild central canal stenosis.
4. Broad-based disk bulge at L3-L4 with mild bilateral neuroforaminal narrowing.