

Govt. of the People's Republic of Bangladesh

DEPARTMENT OF RADIOLOGY & IMAGING

Rangpur Medical College Hospital, Rangpur.

ID. NO.	0538	Date: 09-03-2022
Name of Patient	SADEKUL ISLAM	Age: 45 Yrs.
Referred by:	Prof. of Medicine	Sex: M

MRI SCAN OF CERVICAL SPINE

Clinical profile: Difficulty in walking for 02 months.

MRI of cervical spine was performed using T1 ,T2 weighted, STIR sequences in axial and sagittal planes.

The cervical curvature is maintained. The alignment of the vertebrae is normal. The marrow within the vertebrae reveals normal signal intensity. No focal bony lesion is seen.

Expansion with signal change is seen in spinal cord extending from C1 to C7 vertebral levels appearing iso intense on T1 and hyper intense on T2 weighted images. All cervical intervertebral discs are desiccated. Posterior bulge of disc between C3-4, C4-5,C5-6 and C6-7 causing thecal sac compression. Spinal canal narrowing is seen at C3-4,C4-5,C5-6 and C6-7 discs levels. There is evidence of ligamentum flavum hypertrophy at C4-5, C5-6 and C6-7 discs levels. The cranio-vertebral junction appears normal. There is no evidence of atlanto-axial dislocation, tonsillar herniation or syringomyelia. No abnormality is detected in the prevertebral region.

Impressions:

- Expansion with altered signal intensity in spinal cord extending from C1 to C7 vertebral levels- due to demyelination (may be transverse myelitis).
- Posterior bulge of discs between C3-4, C4-5, C5-6 and C6-7causing spinal canal narrowing.
- Degeneration of all cervical intervertebral discs.

Screening: End plates degenerative changes in upper dorsal and lower lumbar vertebrae.

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