

**RADIOLOGY REPORT**

Patient Name Hanif Abu  
NRIC/Passport Number G2274878K  
DOB 01/12/1991  
MR Number FP00085203  
Service Date 29/04/21  
Order Dr Sathappan, SS

Sex/Age M/29  
Account Number FA00271172  
Patient Location DIS

**PROCEDURE:** MR Lumbar Spine

**CLINICAL INDICATION:** PID lumbar spine.

**TECHNIQUE:**

Multiplanar MRI of the lumbar spine performed.  
Sagittal: T1 and T2 weighted, T2 FS,  
Axial: T2 weighted sequences.  
No intravenous gadolinium was administered for this study.

**COMPARISON:**

No prior similar study was available for review.

**REPORT:**

**MRI of the Lumbar Spine:**

The scout images appear unremarkable.  
Counting from C2 vertebra, the last unfused vertebra is labeled L5. There is no transitional vertebra.  
The conus ends normally at T12/L1 level.

There is loss of normal lumbar lordosis.  
Bony alignment is otherwise satisfactory. There is no spondylolisthesis.  
Vertebral heights are preserved. Marrow signal appears unremarkable.

Intervertebral spaces are preserved.  
There is dessication of the L5/S1 intervertebral disc, associated with right subforaminal zone annular tear.  
The rest of the lumbar intervertebral discs retain normal signal.

At L4/5 level, there is a diffuse disc bulge, causing mild narrowing of the lateral recesses bilaterally, and mild narrowing of the L4 neural exit foramina bilaterally.

At L5/S1 level, there is a right posterolateral disc protrusion, touching the descending right S1 nerve root, causing moderate narrowing of the right lateral recess, and mild narrowing of the right L5 neural exit foramen.  
There is no paravertebral mass.