



পপুলার ডায়াগনস্টিক সেন্টার লিঃ POPULAR DIAGNOSTIC CENTRE LTD.

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Magnetic Resonance Imaging

ID No. : **BG212829** Date: Wed 29/09/21
Patient's Name : **Md Enamul Haque** Age : 46 Year(s) Sex : Male
Refd. By : Dr. Md. Milon Badsha, MBBS, BCS, FCPS (Med), MD (Neuro Med) Course, CCD
Specimen : MRI of Cervical Spine

MRI OF CERVICAL SPINE

HISTORY:

- ? Cervical spondylosis.

TECHNIQUE:

- Axial : T1, T2.
- Sagittal : T1, T2.
- Non-contrast scans were obtained.

FINDINGS:

- Cervical lordosis is mildly reduced.
- Endplate changes (hypo-intense in T1W & hyper-intense in T2W) is seen in C4 – C6 vertebral bodies – Modic type – II.
- No spinal canal stenosis is noted.
- No ligamentum flavum or facet joint hypertrophy is seen.
- No evidence of paraspinal abnormal soft tissue mass or epidural collection is seen.
- C2-C3 disc : Height & signal intensity is maintained. No bulging or herniation is observed. Lateral recesses are not obliterated or narrowed.
- C3-C4 disc : Height & signal intensity is maintained. Central and bilateral paracentral annular disc bulge indenting ventral thecal sac without nerve root impingement.
- C4-C5 disc : Mildly reduced disc height & signal intensity. Central & bilateral paracentral annular disc bulged causing compression over exiting nerve root on both sides, narrowing of lateral recess & mildly stenosed spinal canal.
- C5-C6 disc : Mildly reduced disc height & signal intensity. Central & bilateral paracentral annular disc bulged causing compression over exiting nerve root on both sides, narrowing of lateral recess & mildly stenosed spinal canal.
- C6-C7 disc : Height & signal intensity is maintained. Central & bilateral paracentral annular disc bulged causing compression over exiting nerve root on both sides, narrowing of lateral recess & mildly stenosed spinal canal.
- C7-D1 disc : Height & signal intensity is maintained. No bulging or herniation is observed. Lateral recesses are not obliterated or narrowed.

Continue page : 02