

Patient Nr. : 530485 **Date** : 07.10.2016
Name-Surname : Marina Aleksandrova Valkova **Date of Birth** : 22.04.1994 (F)

Exam Date and Description : 07.10.2016 - Lumbar Vertebral Column MRI

LUMBOSACRAL MRI

TECHNIQUE: Sagittal T1-T2-TRIM-DWI, Coronal T2, Transverse T1 T2-TRIM, post I.V. contrast (contrast agent containing 7.5ml of Gadolinium) Sagittal and Transverse T1 FSE, Transverse vibe.

Normal lumbar lordosis.

Vertebra corpus heights are maintained.

Plaque-screw instrumentation system pertaining to past operation is observed at L5-S1 level. Postop defect is observed in vertebra posterior elements at S1-L1 level.

Grade I anterolisthesis is present at L5-S1 level.

L5-S1 disc space is narrowed. In this disc, loss of signal associated with degeneration is observed in T2 weighted series.

No bulging towards spinal canal is observed in the posterior contours of discs. Neural foramina appear patent.

Spinal cord end and distribution of cauda equina stems are normal.

AP diameter of osseous spinal canal is physiologic.

A well-circumscribed, post IV contrast intensely opacifying mass lesion, hypointense in T1 weighted sections and hyperintense in T2 weighted series, the largest dimensions of which are 28x27x29mm, is observed inside paravertebral muscles adjacent to L3 vertebra left transverse process. Neighboring muscle groups are characterized by normal anatomical signal properties. No extension into spinal canal is detected.

MRI IMPRESSION:

*A well-circumscribed mass lesion adjacent to L3 vertebra left transverse process (of neural origin?).

*Postop changes, grade I anterolisthesis at L5-S1 level.

Regards,

Oktay Karadeniz, MD
Radiologist