

**DR CAROLINE TINSTON**

Tel:

**PATIENT:** Alida Macgregor

**DOB:** 10/08/1970 **Age:** 53

**ID:** 15432907

**EXAM DATE:** 03/03/2023

**Reported:** 23/03/2023

Dear, DR TINSTON

Re: **Ms Alida Macgregor - DOB: 10/08/1970**

**CT Cv/Th Spine (56220+56221) No IV Cont**

**\*\*ADDENDUM REPORT\*\***

CT OF THE CERVICAL AND THORACIC SPINE

**CLINICAL DATA**

Chronic back pain previous degenerative C6-7 disc bulge. Increasing thoracic pain

**FINDINGS**

Non-contrast CT. No previous imaging for comparison

Cervical spine

There is straightening of the normal cervical lordosis. Vertebral heights are maintained

There is a posterior disc osteophyte at C6-7 with cord contact. No significant foraminal narrowing. No other significant vertebral canal or foraminal narrowing

Thoracic spine

The alignment is within normal limits and the vertebral heights are maintained. No significant vertebral canal or foraminal narrowing identified.

**CONCLUSION**

Posterior disc osteophyte C6-7 with cord contact.

No other significant vertebral canal or foraminal narrowing

Addendum Report Reported by: Dr Saundari Appu

**\*\*ORIGINAL REPORT\*\***

CT LUMBAR SPINE

Clinical History: Degenerative change ? progression.

Technique: An unenhanced CT scan of the lumbar spine was performed.

Comparison: None.

Report: Severe degenerative disc disc located at the L5-S1 level.

Grade 1 retrolisthesis of L1 on L2, L2 on L3, L3 on L4 and L4 on L5 of up to 4mm.

L2-3: No spinal stenosis or neuroforaminal narrowing.

L3-4: Moderate spinal stenosis caused by a combination of moderate to severe posterior discovertebral disease measuring up to 4 to 5mm in diameter, mild to moderate bilateral hypertrophic degenerative facet disease, mild bilateral ligamentum flavum hypertrophy and congenitally short pedicles at this level. Mild bilateral neuroforaminal narrowing.

L4-5: Moderate spinal stenosis caused by a combination of moderate to severe posterior discovertebral disease measuring up to 4 to 5mm in diameter, moderate bilateral degenerative facet disease and mild bilateral ligamentum flavum hypertrophy. Mild to moderate left sided neuroforaminal narrowing and mild right sided neuroforaminal narrowing.

L5-S1: Moderate bilateral degenerative facet disease. There is a large superimposed left posterolateral/left far lateral osteophyte complex measuring up to 10mm in diameter which moderately to markedly compresses the exiting left L5 nerve root.

There is a large superimposed right posterolateral/right far lateral discovertebral complex/osteophyte complex measuring up to 7mm in diameter which mildly compresses the exiting right L5 nerve root.

The visualised S1 and S2 nerve roots are normal.

Both sacroiliac joints are normal.

## **CONCLUSION:**

1. Extrinsic compression of the exiting left L5 nerve root.
2. Mild to moderate extrinsic compression of the exiting right L5 nerve root.
3. Severe degenerative disc disease located at the L5-S1 level.

Thank you for referring Alida MacGregor

Yours sincerely,

DR ERIC BRECHER

Original Report Reported by: Dr I-Telerad Reporting

**- I-TELERAD REPORTING CENTRE**

**Electronically signed at 12:17 pm Thu 23 March 2023**