PATIENT Mr Erol Urer 8 Ashton Rise , NARRE WARREN SOUTH, VIC, 3805 03/06/1967, Male

REQUEST DETAILS
Lab. Reference: 2025BW0004875-1

Date Requested: 03/02/2025 Date Collected: 06/02/2025 04:30 pm

Test Name: SPINE TWO REGS CERVICAL AND LUMBO SACRAL CT (Final)

HEALTH PROVIDER DETAILS

Dr Chi Lye Tang

Patient Name: Erol Urer, DOB: 03/06/1967, Date: 06/02/2025 16:30, Patient Identifier: 802558

CT LUMBAR SPINE

Clinical Information:

Low back pain, left leg pain, previous L3-L4 microdiscectomy, possible nerve impingement.

Findings:

T12-L1: No disc herniation, canal is satisfactory.

L1-2: Mild diffuse disc bulge, mild canal stenosis due to combination of disc bulge and facet joint degeneration.

L2-3: Moderate canal stenosis due to disc bulge and facet joint osteoarthritis.

L3-4: Evidence of right hemilaminectomy. Mild canal stenosis due to facet joint osteoarthritis and a mild diffuse disc bulge.

L4-5: Moderate to severe canal stenosis due to diffuse disc bulge and facet joint osteoarthritis.

 ${f L5-S1:}$ Mild canal stenosis due to central disc protrusion. Facet joints are mildly degenerate.

Foraminal stenoses as follows:

Right L3-4 moderate.

Right L4-5 moderate to severe.

Right L5-S1 moderate.

Left L3-4 moderate to severe.

Left L4-5 moderate to severe.

Left L5-S1 mild.

Conclusion:

- 1. L4-5: Moderate to severe canal stenosis
- 2. L2-3: Moderate canal stenosis
- 3. L4-5 left moderate to severe facet joint osteoarthritis.
- 4. Previous decompression surgery at L3-4.
- 5. With regards to left leg pain, this may potentially be emanating from either the **left L3-4 or left L4-5** foraminal stenoses.

CT CERVICAL SPINE

Clinical Information:

Bilateral hand numbness, possible cervical impingement.

Findings:

There is mild reversal of the normal cervical lordosis.

C2-3: No disc herniation, canal is satisfactory.

C3-4: Mild central disc protrusion contacts the cord.

C4-5: Mild diffuse disc bulge contacts the cord.

C5-6: Moderate asymmetric disc bulge worst to the left mildly compresses the left anterolateral cord.

C6-7: Mild diffuse disc bulge.

C7-T1: No disc bulge.

Facet joint osteoarthritis as follows: C2-3 mild bilateral.

PATIENT Mr Erol Urer 8 Ashton Rise, NARRE WARREN SOUTH, VIC, 3805 03/06/1967, Male

REQUEST DETAILS

Lab. Reference: 2025BW0004875-1

Date Requested: 03/02/2025 Date Collected: 06/02/2025 04:30 pm

Test Name: SPINE TWO REGS CERVICAL AND LUMBO SACRAL CT (Final)

HEALTH PROVIDER DETAILS

Dr Chi Lye Tang

C5-6 mild bilateral. C6-7 mild bilateral.

Foraminal stenoses as follows:

Right C5-6 moderate to severe due to degenerate osteophytes from the disc.

Left C5-6 moderate to severe.

Left C6-7 mild to moderate.

Conclusion:

Bilateral C5-6 moderate to severe foraminal stenoses due to uncinate process hypertrophy secondary to disc degeneration.

C5-6 asymmetric disc bulge worst to the left compressing the left anterolateral cord.

Mild facet joint osteoarthritis.

Reported by:

Dr John Troupis

FRANZCR

______ CAPITAL RADIOLOGY 286 CLYDE RD BERWICK We offer WALK IN X-Ray and Low Dose CT services. Selected Bulk Billed and Private MRI scanning, CT and Ultrasound Interventional procedures. Free on site parking. We accept all referrals. Please visit https://www.capitalradiology.com.au/telehealth or email berwick@capitalradiology.com.au There has been a recent upgrade to Best Practice software. If you are using Best Practice software in your clinic please email us at: | bpereferral@capitolhealth.com.au to ensure e-referrals continue to work | for you and your patients.

Copy and paste this link to view images https://connect.capitalradiology.com.au/Portal/app#patients/802558