HIGH ST XRAY - Reference No: 867195 Status:

Patient: Deanna BUCK

Linked by:

Message: 27/10/1943 DOB: Address: 65 Castlemaine Road Maldon 3463

Ordered by: Dr Kirby Jefferies on 00/00/0000

Collected: 29/10/2019 - 4:52 PM Notified by:

Message: 29/10/2019 Reported:

Kirby Jefferies

Non urgent appointment plu

on 00/00/0000

MRI CERVICAL RADICULOPATHY GP ADULT >16

This report is for: Dr K. Jefferies

Referred By: Dr K. Jefferies

MRI CERVICAL SPINE 29/10/2019 Reference: 867195

MRI CERVICAL SPINE

Indication

Some mild radicular pain down left side but a lot of pain central

Known arthritis with crunching on neck movement.

Technique

Multiplanar, multisequence non contrast 3T MRI of the cervical spine performed.

Report

C1/2:

No significant abnormality.

Upper cervical canal is capacious.

C2/3:

Normal posterior disc morphology.

Moderate right and mild facet joint arthropathy.

Contact but not definite compression of the exiting right C3 nerve root.

Spinal canal adequate.

C3/4:

Left uncovertebral disc-osteophyte complex with moderate facet joint arthropathy causing moderate to severe left foraminal stenosis and likely compression of the exiting left C4 nerve root. Minor right neural exit foraminal narrowing.

Spinal canal adequate.

Small bilateral uncovertebral osteophytes with facet joint

arthropathy worse on the left.

Moderate to severe left and mild right neural exit foraminal narrowing.

Suspected compression of the exiting left C5 nerve root.

Spinal canal adequate.

C5/6:

Severe left facet joint arthropathy with small uncovertebral

osteophytes.

Severe left and mild right neural exit foraminal narrowing.

Likely compression of the exiting left C6 nerve root.

Spinal canal adequate.