

Patient Name: BALLINGER, ROBYN
Patient Address: P.O. BOX 75, 3463
D.O.B: 22/07/1958
Medicare No.: 30585687211
Lab. Reference: 3739944
Addressee: DR LOUISA HOPE

Gender: F
IHI No.:
Provider: Bendigo Radiology Group
Referred by: DR LOUISA HOPE

Date Requested:
Date Collected: 25/11/2020
Specimen:

Date Performed: 25/11/2020
Complete:

Subject(Test Name): CT-CT L SPINE WITHOUT IV CONTRAST
Clinical Information:

This report is for: Dr L. Hope
Referred By:
Dr L. Hope

Copies:
Mr M. McEvoy

L SPINE 25/11/2020 Reference: 3739944

LUMBAR CT

Indication:
None stated.

Technique:
Scans from T12.

Findings:

There are degenerative changes at all levels most marked inferiorly and especially affecting the L5/S1 level where there is gas in the narrowed disc. Prominent apophyseal joint osteoarthritis is also present.

Mild canal stenosis results at L4/5.

No disc protrusion is seen at any level and no significant stenosis elsewhere.

Radiologist: Dr R. Jarvis