



**NATIONALRad**  
SPECIALISTS IN DIAGNOSTIC IMAGING

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PATIENT: JOHN SMITH  
DOB: 5/5/1955  
FILE #: 12345  
PHYSICIAN: REFERRING  
EXAM: MRI THORACIC SPINE WITHOUT CONTRAST  
DATE: 1/1/2011

#### CLINICAL INFORMATION

Dorsal right medial upper back pain for 10 weeks. Evaluate for degenerative disc disease

#### COMPARISON

None

#### CONTRAST

None given

#### TECHNIQUE

MRI of the thoracic spine was obtained on a 3 Tesla magnet with the following sequences: Axial T2, sagittal T1, T2, and STIR.

#### FINDINGS

There is straightening of the normal cervical lordosis on the localizer sequence. There is a normal thoracic kyphosis. There is mild disc desiccation from T2-3 through T9-10 with mild prevertebral spondylosis at T2-3. Vertebral body heights are well-maintained without compression fracture. There is a no bone marrow edema or destructive bony lesions identified. There is mild diffuse congenital narrowing of the spinal canal. No paraspinal soft tissue mass. There is a well-circumscribed 8mm T2 hyperintense lesion within the right hepatic lobe most likely representing a hepatic cyst or hemangioma.

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T7-8: There is a focal 3 mm central disc protrusion which results in deformity of the ventral spinal cord and a mild spinal canal stenosis without definite cord signal abnormality. No significant neural foraminal narrowing.

T8-9: There is a focal 2 mm right central disc protrusion which results in mild deformity of the right ventral thecal sac and cord without spinal canal stenosis or neural foraminal narrowing.

T9-10: There is mild left facet hypertrophy without spinal canal or neural foraminal stenosis.

Elsewhere within the thoracic spine, there is no significant posterior disc bulge, disc protrusion, spinal canal stenosis, or neural foraminal narrowing.

#### IMPRESSION

1. T7-8 focal 3 mm central disc protrusion which results in deformity of the ventral spinal cord and a mild spinal canal stenosis without definite cord signal abnormality.
2. T8-9 focal 2 mm right central disc protrusion with mild deformity of the right ventral thecal sac and cord.
3. T9-10 mild left facet hypertrophy.
4. Mild diffuse congenital narrowing of the spinal canal.
5. 8mm well-circumscribed T2 hyperintense lesion within the right hepatic lobe, most likely representing a hepatic cyst or less likely hemangioma. This could be confirmed with abdominal ultrasound.

[NationalRad Neuroradiologist]  
Board Certified Radiologist

THIS REPORT WAS ELECTRONICALLY SIGNED

*Report approved on*