

## **Sample MRI Dictations**

### **MRI Lumbar Spine:**

REASON FOR EXAM: BACKACHE

ORIGINAL REPORT: CLINICAL INFORMATION: ALTERED BLADDER HABITS, BACK PAIN.

EXAMINATION: MRI LUMBAR SPINE WITHOUT AND WITH CONTRAST, 05/31/2008

TECHNICAL: MULTIPLANAR MULTISEQUENCE IMAGING OF THE LUMBAR SPINE WAS PERFORMED PRIOR TO AND AFTER THE INTRAVENOUS ADMINISTRATION OF 20 ML MAGNEVIST CONTRAST MEDIA.

COMPARISON: NONE.

FINDINGS: LUMBAR ALIGNMENT IS NORMAL. THE CONUS MEDULLARIS TERMINATES NORMALLY AT THE LOWER THIRD OF L1. THE VISUALIZED PARASPINAL SOFT TISSUES AND ABDOMINAL AORTA APPEAR GROSSLY NORMAL. VERTEBRAL BODY HEIGHT IS MAINTAINED AT ALL LEVELS.

L1-2 AND L2-3 APPEAR NORMAL.

AT L3-4, THERE IS MINIMAL POSTERIOR DISK BULGING WITHOUT DISK PROTRUSION OR NEURAL COMPRESSION. THERE IS MILD FACET ARTHROPATHY.

AT L4-5, THERE IS MILD POSTERIOR BROAD-BASED DISK BULGING WITHOUT DISK PROTRUSION OR IDENTIFIED NEURAL COMPRESSION. THERE IS MODERATE FACET AND LIGAMENTOUS HYPERTROPHY.

AT L5-S1, THERE IS MINIMAL POSTERIOR DISK BULGING. THERE IS MODERATE FACET ARTHROPATHY.

THE NEURAL FORAMINA ARE PATENT AT ALL LEVELS.

THERE IS NO ABNORMAL ENHANCEMENT ON POSTGADOLINIUM IMAGING.

IMPRESSION: DEGENERATIVE DISK CHANGES AND MULTILEVEL SPONDYLOSIS OF THE POSTERIOR ELEMENTS

**MRI Brain:**

REASON FOR EXAM: HEADACHE

ORIGINAL REPORT: CLINICAL INFORMATION: HEADACHE.

EXAMINATION: MR BRAIN WITHOUT CONTRAST, 05/31/2008

TECHNIQUE: MULTIPLANAR MULTISEQUENCE IMAGING OF THE BRAIN WAS PERFORMED WITHOUT INTRAVENOUS CONTRAST.

COMPARISON: CT HEAD OF SAME DATE.

FINDINGS: THERE IS NO RESTRICTED DIFFUSION TO SUGGEST ACUTE ISCHEMIA. THERE IS NORMAL-APPEARING ANATOMY OF THE CRANIOCERVICAL JUNCTION. FLAIR IMAGING DEMONSTRATES MINIMAL PERIVENTRICULAR AND SCATTERED MULTIFOCAL SUBCORTICAL SIGNAL HYPERINTENSITY COMPATIBLE WITH BENIGN WHITE MATTER CHANGES OF AGING. VENTRICLE SIZE IS NORMAL. THERE IS NO MIDLINE SHIFT. NORMAL VOID SIGNAL IS PRESENT WITHIN THE CAROTID AND BASILAR ARTERIES. THE VISUALIZED PARANASAL SINUSES AND MASTOID AIR CELLS ARE CLEAR.

IMPRESSION

1. NO EVIDENCE OF ACUTE HEMORRHAGE, ISCHEMIA OR MASS.
2. MILD BENIGN-APPEARING WHITE MATTER CHANGES LIKELY RELATED TO NORMAL CHANGES OF AGING.