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EXAM: MRI CERVICAL SPINE WITHOUT CONTRAST

HISTORY: Neck pain and arm pain

TECHNIQUE: Multisequence and multiplanar MRI of the cervical spine was performed on a 1.5 Tesla MRI scanner without contrast.

COMPARISON: None available.

FINDINGS:

The cervical spine is visualized from the craniocervical junction through inferior T2 level.

Postoperative changes of anterior cervical discectomy and fusion seen at C4-C5.

The vertebral body heights are preserved. Modic type II endplate changes are seen at C5-C6 and C6-C7. No suspicious osseous lesions. There is straightening of the cervical spine without discrete spondylolisthesis. There is mild levoconvex curvature centered at the cervicothoracic junction. Multilevel intervertebral disc height loss which is worst and moderate to severe at C6-C7.

C2-3: No disc bulge or protrusion. No spinal canal stenosis. No foraminal narrowing.

C3-4: Broad-based 1 to 2 mm disc protrusion indents the thecal sac. No spinal canal stenosis. Uncovertebral hypertrophy results in mild bilateral foraminal narrowing.

C4-5: Surgical level. Mild residual narrowing of the thecal sac. Uncovertebral hypertrophy and facet arthrosis results in mild right and moderate left foraminal narrowing.

C5-6: Broad-based 1 to 2 mm disc protrusion partially effaces the thecal sac. Mild spinal canal stenosis. Uncovertebral hypertrophy and facet arthrosis results in mild bilateral foraminal narrowing.

C6-7: Broad-based 1 to 2 mm disc protrusion partially effaces the thecal sac. No spinal canal stenosis. Uncovertebral hypertrophy and facet arthrosis results in moderate bilateral foraminal narrowing.

C7-T1: Broad-based 2 mm disc protrusion indents the thecal sac. No spinal canal stenosis. No foraminal narrowing.

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Normal cord signal.

The cervical soft tissues are unremarkable.

IMPRESSION:

1. Mild narrowing of the thecal sac/spinal canal stenosis at C4-C5 and C5-C6.
2. Multilevel mild-to-moderate foraminal narrowing.
3. Normal cord signal.
4. Postoperative changes of ACDF at C4-C5.

In compliance with recent Worker's Compensation legislation (Labor Code Section 4628 (j) and 5703 (a) and Insurance Code Section 556): I declare under penalty of perjury that I have not violated Labor Code Section 139.3 and that the information contained in this report and its attachments, if any, is true and correct to the best of my knowledge and belief, except as to information that I have indicated I received from others. As to that information, I declare under penalty of perjury that the information accurately described the information provided to me and, except as noted herein, that I believe it to be true. Furthermore, this evaluation is in compliance with the guidelines established by the Industrial Medical Council or Administrative Director pursuant to paragraph (5) of subdivision (j) of Labor Code Section 139.2 or 5307.6.

Signed by me in the County of Orange, this 26 day of 4 2023.

End of diagnostic report for accession: 37973165

Dictated: 04-26-2023 8:33:06 AM

Electronically Signed By: Patel, Sagar, MD 04-26-2023 8:33:06 AM

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Exam requested by: FRANK GUELLICH MD

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