

Clinical Case 2020-020

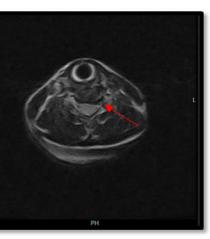


Medical Center:	American Health Imaging-Decatur, GA
Clinical Details:	Female, 44 years. Neck pain radiating to the left shoulder and arm. No trauma.
Anatomy:	Cervical Spine
MRI Techniques:	T2 Sagittal and Axial views neutral, and in flexion and extension are obtained. Acquisition software: MR-GUI Pro.
Findings:	Broad based disc bulge and left-sided disc-osteophyte complex at C5-C6, encroaching on the left neuralforamina. When placed in extension, the pathology is exaggerated as the disc bulge at C5-C6 increases slightly, coupled with posterior ligament buckling which contributes to mild spinal cord compression and displacement of the cord to the right. Also in extension, 2 additional very mild central disc bulges are noted at C3-C4 and C4-C5 that were not seen in the neutral position.



Sagittal T2 High Resolution 3'37"





Axial T2 Fast Extension 1'32"

Conclusion

The patient had a complaint of neck pain radiating to the left shoulder and arm for several weeks. The patient is an athlete but reported no trauma. Positional imaging of the cervical spine performed on ASG-Paramed's MRO multi-positional open bore MRI system revealed a disc bulge at C5-C6 in the neutral, supine position. The patient was placed in flexion and extension due to reported positional pain. The extension imaging demonstrated an increase in the disc bulge seen in the neutral position, with 2 more levels showing minor disc bulges not previously seen along with posterior ligament buckling at the C5-C6 level causing an increase in spinal stenosis which directly correlated with the symptoms reported by the patient.

Sagittal T2 Fast Extension 1'32"