



Name	: Baby SHAIK SHIFA MARYAM	Age/Gender	: 9 Months / Female
Billed No	: 20230722089	Reported Date	: 23/07/2023 12:11:52 PM
Ref.by	: Dr. MOHAMMED ZUBAIR (TUFFAH HOSPITALS)	Print Date & Time	: 23/07/2023 12:13:20 PM

## MRI DORSAL SPINE WITH SCREENING OF WHOLE SPINE

### Technique:

T1-T2 Sagittals & Axials  
IR Sagittals & Coronals  
DWI & GRE Axials

**Clinical Details:** Soft tissue swelling in right low back --- for evaluation.

### Findings:

There is a 7.8 (CC) x 7.3 (TR) x 4.1 (AP)cm ill defined infiltrative lobulated heterogenous moderate T2 hyperintense mass like lesion involving pre, bilateral paravertebral regions between D7 and L3 levels. It is seen to extend into the spinal canal from right neural foramina at D10-D11 & D11-D12 levels with associated compression, left lateral displacement of distal spinal cord and conus medullaris. The conus medullaris shows altered signal intensity on T2WI and flattening in mediolateral direction.

Extension of the mass posteriorly into the right paraspinal muscles is seen. Focal bony erosion involving the right neural arches at dorsolumbar junction with associated altered marrow signal intensity.

Extension of the mass into preaortic region causing compression, anterior displacement of aorta, IVC. The IVC is compressed, partially effaced, however no evidence of any thrombosis.

Bilateral renal arteries and veins are compressed, partially effaced.

Suggestion of involvement of posterolateral aspects of right lower ribs with associated marrow edema.

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Rest of the cervicodorsal and lumbar spine is unremarkable.

Rest of spinal cord is normal.

Filar roots are normal.

There is another 2.0 x 2.5cm similar signal intensity nodular mass lesion in left supraclavicular region.

These mass lesions show central faint hypointense signals on GRE images suggestive of amorphous calcification.

Bilateral adrenal glands could not be delineated separately from the mass.

### **IMPRESSION:**

- **LARGE 7.8 x 7.3 x 4.1cm PRE, PARAVERTEBRAL MASS BETWEEN D7 TO L3 LEVELS WITH ASSOCIATED INTRASPINAL EXTENSION ON RIGHT SIDE CAUSING COMPRESSION, LEFT LATERAL DISPLACEMENT OF DISTAL SPINAL CORD / CONUS MEDULLARIS. THE MASS SHOWS CENTRAL GRE HYPOINTENSE SIGNAL SUGGESTIVE OF AMORPHOUS CALCIFICATION. EXTENSION OF THE MASS POSTERIORLY INTO THE RIGHT PARASPINAL MUSCLES IS NOTED.**
- **INFILTRATION, ALTERED MARROW SIGNALS INVOLVING THE POSTERIOR NEURAL ARCHES ON RIGHT SIDE AT RIGHT DORSOLUMBAR JUNCTION AND SUSPICIOUS INVOLVEMENT OF THE POSTEROLATERAL ASPECTS OF RIGHT LOWER RIBS.**



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**-----DIAGNOSTIC POSSIBILITIES OF LARGE NEUROGENIC TUMOR.**

1. ? GANGLIONEUROBLASTOMA.
2. MULTICENTRIC NEUROBLASTOMA.

• ANOTHER SIMILAR LESION MEASURING 2.0 x 2.5cm IS ALSO SEEN IN LEFT SUPRACLAVICULAR FOSSA.

• REST OF SPINAL CORD IS NORMAL.

**-----SUGGEST CLINICAL AND BIOPSY CORRELATION.**

FOR CLINICAL CORELATION & FOLLOW-UP

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**Dr. Madhavi Nori**  
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