



BOMBAY HOSPITAL INSTITUTE OF MEDICAL SCIENCES

DEPARTMENT OF IMAGING,

SECTION OF MRI

12, New Marine Lines, Mumbai - 400 020.

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Patient Name	: Mr M.M KHAN	Age	: 76	IP/OP No	: 9336217
Referred By	: Dr. KHADILKAR SATISH VASAN	Sex	: M	Bed No	:
Date	: 27/04/2016	Ref No	: 55532474		
Ward	:				
User ID	: NLF 28/04/2016 11:34:20 AM				

MRI OF THE CERVICAL SPINE

MRI of the cervical spine was performed.

Clinical details: Weakness in all four limbs.

Imaging findings: The curvature of cervical spine and alignment of the vertebrae appear normal.

The cervical vertebrae appear normal in height and marrow signal with small peridiscal osteophytes seen from C3 to C7 levels.

Dessication of all cervical discs are noted.

Mild diffuse bulge and focal left posterolateral herniation of C3/4 disc is seen indenting the thecal sac and narrowing the left lateral recess.

Mild disc bulges are seen from C4/5 to C6/7 levels which indents the thecal sac without causing significant canal or foraminal narrowing. Asymmetric ligamentum flavum thickening is also noted from C3/4 to C6/7 levels.

The cervical spinal cord appears normal in course, calibre and signal intensity.

The pre/paravertebral soft tissues appear normal.

CONCLUSION: Diffuse disc bulges and ligamentum flavum thickening seen from C3/4 to C6/7 levels with a left posterolateral herniation of C3/4 disc noted narrowing the left lateral recess.

Dr. SONALI SHAH

D.N.B. , D.M.R.D.

Consultant Radiologist



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DEPARTMENT OF CLINICAL NEUROPHYSIOLOGY

EMG & EVOKED POTENTIALS



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Date: 20/04/2016

Name: **M. M. Khan**

Sex: Male

Age: 76yrs.

Ref. By: Dr. S. V. Khadilkar

Referred for: ? ALS

Presenting Complaint:

- November 2015 – Change in gait
- Since 2-3 months- hands weak / tremble, distally

O/E: Fasciculations all over

Muscle stretch reflexes brisk

Wasting ++

Comments:

Sensory

Right Radial	→	Normal
Left Median D2	→	Normal
Left Ulnar	→	Normal
Right & Left Sural	→	Normal
Right Superficial Peroneal	→	Normal

Motor

Right Median APB	→	CMAP: Mildly attenuated; No evidence of Partial Conduction Block on neck stimulation
Left Median APB	→	CMAP: Moderately attenuated
Right Ulnar ADM	→	CMAP: Normal
Left Ulnar ADM	→	CMAP: Mildly attenuated; No evidence of Partial Conduction Block on neck stimulation.
Right Fibular EDB	→	Severely attenuated
Right Tibial-AH	→	CMAP: Moderately attenuated
Left Tibial-AH	→	CMAP: Severely attenuated

EMG findings as listed:

Impression:

- There is evidence of Asymmetric, widespread, active, chronic and ongoing * motor axon degeneration affecting lumbar, cervical and thoracic segments.
- Site of involvement is likely to be at Anterior Horn Cell level.

(*Multiple unstable polyphasics noted in many muscles)

Please correlate all findings with your clinical impression.
ABBR: CMAP: Compound muscle action potential

Typed by: Akshaya Kavasia

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