Name: Yvonne Kalley Franklin | DOB: 6/17/1979 | MRN: U4772842 | PCP: Leilani D Paras, MD | Legal Name: Yvonne Kalley Franklin

MRI C T L SPINE WO/W CONTRAST

Collected on Jul 28, 2026 1:12 AM

Results

Impression

1. No cord compression. Anterior epidural tumor extension at T5 and T8 levels
Diffuse osseous metastasis multiple cervical, thoracic and lumbar vertebral bodies. Pathologic fractures involving T4, T5 and T8 vertebral bodies with mild height loss at T5 (40%).

This is a preliminary report dictated by Abraham Mengstu M.D., neuroradiology fellow (PGY-6).

Unless an Attending Final Impression appears below, the report has not yet been finalized and an attending radiologist has not reviewed these images.

ATTENDING FINAL REVIEW:

I have personally reviewed the images & agree with the report (or as edited). Bilski grade at T8 is 1C.

I have personally reviewed the images and agree with the report (or as edited).

Narrative

EXAMINATION:
MRI C-T-L SPINE WO/W CONTRAST

CLINICAL INDICATION: Stage IV breast cancer.
metastatic cancer, lytic lesions in spine, spinal stenosis

TECHNIQUE:
MRI Cervical Spine without and with contrast: Extramedullary - tumor (C 4)
Non-contrast: Sag T1, STIR. Ax T1, T2, in-out of phase Post-contrast: Sag , Ax T1 fat sat

MRI Lumbar Spine without and with contrast: extramedullary tumor
Non-contrast: Sagittal T1, T2, STIR. Axial T1, T2, in-out of phase Post-contrast: Sagittal, axial T1 fat sat.

CONTRAST:
GADOTERIDOL 279.3 MG/ML IV SOLN,6 mmol Intravenous,07/27/2026 2357

COMPARISON:
CT 7/27/2026.

FINDINGS:

SPINAL CORD: The conus medullaris terminates at the level of L1-L2, was in normal limits. There is no abnormal cord signal or abnormal cord enhancement.

SPINE: Mild apparent straightening of the normal cervical lordosis could be positional. The normal thoracic kyphosis is maintained. There is mild apparent straightening of the normal lumbar lordosis. Small central disc protrusions are seen at C3-C4, C5-C6 and C6-C7 as well as L2-L3 and L3-L4 resulting in impression of the ventral thecal sac. There is no significant canal or foraminal stenosis.

There is diffuse osseous metastasis in the cervical, thoracic, lumbar and sacral vertebral bodies as well as posterior elements.There are mild compression fractures involving T4, T5 (40% height loss) and T8 vertebral bodies. Possible fluid fluid level at T5 may represent hemorrhage within the vertebral body. L3 vertebral body demonstrates superior and inferior endplate Schmorl's nodules.

There is anterior epidural soft tissue extension at T5 (series 1301 image 10/17) and T8 (series 1601 image 18/62 without cord compression. There may also be possible epidural extension at T4.

Ordering provider: Adrian Lazarevic-Fogelquist
Reading physician: Craige Blackmore
Study date: Jul 27, 2026 11:57 PM
Collection date: Jul 28, 2026 1:12 AM
Result date: Jul 28, 2026 1:42 AM
Result status: Final

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