

**VARDHMAN TRAUMA & LAPAROSCOPY CENTRE PVT. LTD.**

3rd Km., Jansath Road, Muzaffarnagar (U.P.)

11/09/2020

**DR. MUKESH JAIN MS**

ORTHOPAEDIC SURGEON

MV PUSHPA SINGH

**DR. ANUBHAV JAIN MS**

ORTHOPAEDIC SURGEON

69 yr

Mizra

Radiolu R more than 1

Tas Retor 90  
+ Ro 20 ] 1dm  
To myotop SR upo

Dubinov 14

cm

Oreelin GM 1dm

cm

Alkut 23/10

X-ray h.s 8pm <sup>AP</sup> Lel.  
MRI L.S. 8pm

cm

11/9

to L4 5. lesion

c spinal canal stenos

• Dr. Nambiar X AD x 15°

~~Reuter~~ L.S. Bell-

cm

Dr. Mukesh Jain  
Regd. No. : 20828  
E-mail : jainmukeshortho@hotmail.com

SUNDAY CLOSED

(Saturday Closed)  
Local Auth. Regst. No.  
RMEE1904661

Dr. Anubhav Jain  
Regd. No. : 81597

E-mail : dranubhav86@gmail.com

Registration Time : 7.00 P.M. (9219416543, 9219456235)

Helpline : 0131-2623084 / 2623085 / 2622437 / 7830803084 / 7830803085

Reg. Office : C-209, Defence Colony, New Delhi-110024

Website : [www.vardhmanhospital.com](http://www.vardhmanhospital.com)

CIN : U85110DL1996PTC079982



Patient ID	1435	Patient Name	PUSHPA SINGH
Age	69 Yrs	Date	11-Sep-20
Gender	Female	Ref Doctor	DR.ANUBHAV JAIN MS

#### MRI STUDY OF LUMBO-SACRAL SPINE

Anterior and posterior marginal osteophytes noted in peridiscal margins at multiple levels.

Intervertebral discs reveal loss of normal signal intensity on T2W images suggesting of desiccation.

T1 and T2 hyperintensity seen in adjacent end plates at L4-5 level, showing STIR suppression, suggestive of type II modic end plate changes.

At L3-4 diffuse disc bulge seen indenting thecal sac, however no nerve root compression or spinal canal stenosis noted.

Grade I antero-lolisthesis of L4 over L5 with bilateral pars interarticularis fracture and diffuse disc bulge with bilateral ligamentum flavum thickening seen causing severe spinal canal stenosis and right neural foraminal and bilateral (R>L) lateral recess narrowing and compression of right exiting an bilateral traversing nerve roots.

At L5-S1 diffuse disc bulge and left facet joint arthropathy seen indenting thecal sac, however no nerve root compression or spinal canal stenosis noted.

Rest of the lumbar vertebral bodies and intervertebral discs show normal signal intensity.

The visualized pre and paravertebral soft tissues are unremarkable.

The conus medullaris terminates at the L1 level and the thecal sac terminates at the S2 level.

Bilateral sacro-iliac joints appear normal.

The antero-posterior dimensions of the lumbar canal at the level of the intervertebral discs are as follows:

	AP	TRANSVERSE	AREA
L1 - L2	13	15	195 SQ. MM
L2 - L3	13	12	156 SQ. MM
L3 - L4	13	12	156 SQ. MM
L4 - L5	03	03	9 SQ. MM
L5 - S1	08	09	72 SQ. MM

Note is made of right parapelvic renal cyst.

Cont.page-2

Affected  
1m  
23.11.11



Patient ID	1435	Patient Name	PUSHPA SINGH
Age	69 Yrs	Date	11-Sep-20
Gender	Female	Ref Doctor	DR.ANUBHAV JAIN MS

**IMPRESSIONS:**

MRI Lumbo-sacral spine reveals lumbar spondylosis in form of osteophytes formation, disc dessication, end plate degenerative changes WITH

- At L3-4 diffuse disc bulge seen indenting thecal sac, however no nerve root compression or spinal canal stenosis noted.
- Grade I antero-listhesis of L4 over L5 with bilateral pars interarticularis fracture and diffuse disc bulge with bilateral ligamentum flavum thickening seen causing severe spinal canal stenosis and right neural foraminal and bilateral (R>L) lateral recess narrowing and compression of right exiting an bilateral traversing nerve roots.
- At L5-S1 diffuse disc bulge and left facet joint arthropathy seen indenting thecal sac, however no nerve root compression or spinal canal stenosis noted.

*Chetan Garg*

Dr Chetan Garg  
MBBS, DNB, Consultant Radiologist

*Attest  
Amd  
23/9/20*

# SHAKTI PHYSIOTHERAPY & OSTEOPATHY CLINIC

CERTIFIED SPINE MANIPULATIVE THERAPIST (UK)

**DR. KOSHAMBI CHADHA GUPTA (PT)**

Senior Consultant Physiotherapist

Osteopath (Canada)

Fellow In Manipulative Therapy (AUS.)

**DR. RAJAT GUPTA (PT)**

Senior Consultant Physiotherapist

Osteopath (Canada)

Orthopaedic Medicine (Belgium)

PERSONAL PHYSIOS AT PATH TO SERENITY  
PERSONAL PHYSIOS OF MAYOR OF UTTARAKHAND

19/09/20

**FACILITIES**

- Osteopathy
- Modified chiropractic
- Physiotherapy
- PEMF
- LASER Treatment
- FES
- TDCS
- Spine Analysis

**TREATMENT FOR**

- Slip Disc
- Insomnia/Lack Of Sleep
- Headache/Migraine
- Paralysis
- Depression
- Spinal Injuries, ETC.

Rx

Mrs. Pushpa Singh.

Joy/F

c/o: Walking problem, foot & heel stiffness, Hip stiffness  
from 5-8 months. Standing proble

H/o:- D.M - Type 2 (Ayurvedic Medicine)

special Test:- L.L.P.T & Osteopathy Test

O:- L4-L5 - PR { tension },  
L5-S1 - PL  
D.L - T.P (Lt.)  
Sacrum dysfunction.

Pr:- ⑧ MFR  
⑧ spinal adjustment

(iii) Exercise  
(iv) Cold Pack / Hot fomentat

Alt  
23/11/W

Not For Medico Legal Purpose

**CLINICS**

CENTER 1:- 326/356 OMKAR ROAD BLOCK 1 BACK SIDE OF CHAYADEEP CINEMA CHUKUWALA D.DUN.

CENTER 2:- 273 PANDITWARI NEAR GURUDWARA D.DUN.

CONTACT:- 9837703295, 8909640941

19/09/20

# डॉ सोमेश कुमार गुप्ता

Dr. Somesh Kumar Gupta

M.B.B.S., M.S. (Ortho)

276-B, Civil Lines North

Station Road

Muzaffarnagar-251001

Ph.: 0131-2437155

Regd. No. MZN/AL/0162

PUSHPA

66 YRS.

Female

GANDHI COLONY

15/07/2019

Rx

Pain both knee: 2 MONTHS

Perisone - AP Tab.

1.....X.....1

K/C of DM:

Revive Gold Cap.

1.....X.....1

X RAY Both knee - AP [ERECT]

X RAY Both Knee- Lateral

HSF [सिकाई] 3-4 min

Dyno oil for local application

(दो बार) Both knee

limb elevation

ठड़ी घीजों का परहेज़ करना है

X 5 Days

Knee Cap To Use (रात को उतारनी है)

Prognosis explained regarding future outcome

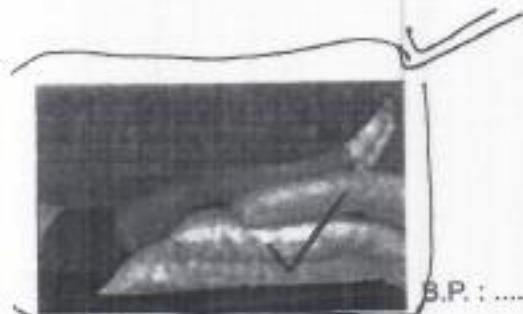
Control of DM by Physician

WEIGHT REDUCTION

Collesine Sachet with water daily once ~

Dr. Somesh Kumar Gupta

B.P. : ..... mm/Hg



रविवार अवकाश

Consultation Time : 10.00 AM to 2.00 PM, 5.00 PM to 7.00 PM

Not for Medico Legal Purposes

