

60358

Smt. No. 21799



Smt. Shridevi Awasiya Vidyapeeth

Affiliated to C.B.S.E. (10+2) Delhi

Wamānpura Jaingara Kiraoli, Agra

Manager/Principal

18.11.2021

2021/SSAY/M-11/2021/07

To Whomsoever It May Concern

Certified that Chiya Gupta D/o Mrs Sakshi Sharma and Mr Amit Gupta is a bonafide student of our school. She is studying in class IX for the session 2021-22.

She is going to appear in Class X Board examination 2022-23

Principal  
Principal  
Smt. Shridevi Awasiya Vidyapeeth  
Wamānpura Jaingara Kiraoli, Agra

Self-attested  
Sakshi Sharma

Sardswati, Aged 65y/f  
#20

Continuation Sheet

Date	20/5/22			
	Altered H/O Pain in Lower Back			
	x 5 yrs.			
	Gradually worsening x 2-3 yrs			
	Pain Radiating Both LL.			
	Numbness, Tingling Both LL			
	Difficulty in sitting & walking and lying.			
Date	22/1/22			
	Taken Psychotic T/T x 8 yrs.			
	H/O H/O x 15 yrs. Hypothyroidism x 20 yrs.			
		RR		RR
	RA	SR	TR	RR
		LR	+	+
	RR	RD	+	+
	L. Spine			
	Lal Aprami			
	Pelvis including H/O			
	Metabolic Profile II history			

Self attested  
Sardswati



# Agra Diagnostic Imaging Research Centre

(A UNIT OF AGRA CAT SCAN CENTRE)

Near Shree Talkies, Eye Pass Road, Agra-2  
Contact No. : +91 7500001111, 9917470450  
Visit us : [www.agradiagnostics.com](http://www.agradiagnostics.com)

PT. NAME: SARASWATI DEVI 62 YRS/F  
REF BY : DR. AVINASH GUPTA, D.M. (NEUROLOGY)

Date - 01-06-2022

Tiny sclerotic focus is seen in articular margin along left SI joint and right femoral head.

Visualised pelvic bones, soft tissue structures & musculature show a normal contour and signal intensity pattern.

Visualised bilateral SI & hip joints appear relatively maintained. No e/o joint effusion or erosions noted. Visualized sacrum is normal in contour & signal intensity.

### IMPRESSION:

- WHOLE SPINE SPONDYLOSIS.
- DIFFUSE AND BILATERAL FORAMINAL DISC BULGE WITH POSTERIOR PERIDISCAL OSTEOPHYTES (HARD DISC) AT C2-3 DISC LEVEL CAUSED MILD CANAL STENOSIS THIS LEVEL.
- DIFFUSE AND BILATERAL FORAMINAL DISC BULGE WITH POSTERIOR PERIDISCAL OSTEOPHYTES (HARD DISC) AT C3-4 DISC LEVEL CAUSED MILD CANAL STENOSIS, MODERATE RIGHT NEURAL FORAMINA NARROWING WITH POSSIBLE EXITING NERVE ROOT COMPRESSION WHILE MILD LEFT EXITING NERVE ROOT COMPRESSION.
- DIFFUSE AND BILATERAL FORAMINAL DISC BULGE WITH POSTERIOR PERIDISCAL OSTEOPHYTES (HARD DISC) AT C4-5 DISC LEVEL CAUSED MILD CANAL STENOSIS AND MILD BILATERAL NEURAL FORAMINA NARROWING.
- DIFFUSE AND BILATERAL FORAMINAL DISC BULGE WITH POSTERIOR PERIDISCAL OSTEOPHYTES (HARD DISC) AT C5-6 DISC LEVEL CAUSED MILD CANAL STENOSIS AND MILD TO MODERATE BILATERAL NEURAL FORAMINA NARROWING.
- GRADE-I FORWARD LISTHESIS OF L5 OVER S1 VERTEBRA WITH DEFECT IN PARS INTERARTICULARIS SUGGESTIVE OF SPONDYLOLYSIS AT L5-S1 VERTEBRAL LEVEL.
- HEIGHT OF L5-S1 DISC IS MILDLY REDUCED.
- BILATERAL FACETAL ARTHROPATHY AT L1-2 & L2-3 DISC LEVELS.
- BROAD BASED AND BILATERAL FORAMINAL DISC BULGE WITH MILD LEFT FACETAL ARTHROPATHY AND MILD BILATERAL LIGAMENTUM FLAVUM HYPERTROPHY AT L3-4 DISC LEVEL CAUSES MILD LEFT NEURAL FORAMINA NARROWING.

Wish You A Speedy Recovery

24x7 HELPLINE 7500001111  
9917470450  
CONT...

THE SCIENCE OF RADIOLOGICAL DIAGNOSIS IS BASED ON THE INTERPRETATION OF VARIOUS SHADOWS PRODUCED BY NORMAL & ABNORMAL TISSUES & ARE NOT ALWAYS CONCLUSIVE FURTHER CLINICOPATHOLOGICAL CORRELATION IS NECESSARY. IN CASE OF ANY DISCREPANCY OR ANY TYPING OR MACHINE ERROR, PLEASE GET IT RECTIFIED IMMEDIATELY.

THANKS FOR THE REFERENCE, KINDLY LET US KNOW THE FOLLOW UP OF THE PATIENT

NOT VALID FOR MEDICAL LEGAL PURPOSES.

*Self collected  
Sahin Sharma*