

Lumbar/Sacrum/Pelvis Radiology Report

Patient: _____ **File #** _____ **Report Date:** _____ **Age:** ____ **Sex:** Male / Female

Lumbar: Anterior-Posterior Lateral Lateral Flexion (L / R) Oblique (L / R)
Source: In House Outside source: Loan Xrays on File Report Copied For File

Gross Pathology _____
 Normal Variants _____
 Refer Out to: _____ Reason: _____

Alignment

Artifacts: Interfere Not Interfere Type of Artifact: _____
Listhesis: Antero _____ Retro _____ Latero _____
Malposition: Flexion _____ Extension _____ Rotation _____ Inferior _____
 L Rot _____ R Rot _____ Lat Flex _____ Superior _____

Curvature

Artifacts: Interfere Not Interfere Type of Artifact: _____
 Hypolordosis Hyperlordosis Hyperkyphosis **Scoliosis:** Levo Dextro Levo-Dextro Dextro-Levo Thoracogenic
 Uncompensated Compensated Lateral - Left Lateral - Right

Congenital Anomaly

Artifacts: Interfere Not Interfere Type of Artifact: _____
 Anomaly: _____ Location _____

Degenerative Joint Disease (DJD)

Artifacts: Interfere Not Interfere Type of Artifact: _____
DJD Evident: L1/2 L2/3 L3/4 L4/5 L5/S1 Transitional

Encroachment

Artifacts: Interfere Not Interfere Type of Artifact: _____
Spondylo: Joint Space Osteophytes Subchondral Sclerosis Deformity of Subluxation
Present at: L1 L2 L3 L4 L5 Transitional

Entrapment

Artifacts: Interfere Not Interfere Type of Artifact: _____
Spondylo: Joint Space Osteophytes Subchondral Sclerosis Deformity of Subluxation
Present at: L1 L2 L3 L4 L5 Transitional

Fracture

Artifacts: Interfere Not Interfere Type of Artifact: _____
Fracture: Negative Present at: _____ Type Of Fracture: _____

Listing

L1 _____ L2 _____ L3 _____ L4 _____ L5 _____ Transitional _____

IVD Syndrome

Artifacts: Interfere Not Interfere Type of Artifact: _____
IVD: w/ Myelopathy w/o Myelopathy
Evident at: L1 L2 L3 L4 L5 Transitional

Osteoarthritis

Artifacts: Interfere Not Interfere Type of Artifact: _____
Irreg Surf: L1 L2 L3 L4 L5 Transitional

Osteophyte

Artifacts: Interfere Not Interfere Type of Artifact: _____
Osteophyte: w/ Encroachment w/o Encroachment
Evident at: L1 L2 L3 L4 L5 Transitional

Unleveling

Pelvic Tilt: L / R **Sacral Tilt:** L / R **Low Femur Head:** L / R

Weight Bearing

Anterior Posterior Lateral - Left Lateral - Right

Artifacts

Artifacts: Interfere Not Interfere Type of Artifact: _____