

RADIOGRAPHIC EXAMINATION

Exam Location: This Office Include Images Outside This Office

Patient Name: _____

MO	DAY	YEAR	DR#	PATIENT NUMBER
1	2	3	4	5
6	7	8	9	10
11	12	13	14	15
16	17	18	19	20
21	22	23	24	25
26	27	28	29	30
31	32	33	34	35
36	37	38	39	40
41	42	43	44	45
46	47	48	49	50
51	52	53	54	55
56	57	58	59	60
61	62	63	64	65
66	67	68	69	70
71	72	73	74	75
76	77	78	79	80
81	82	83	84	85
86	87	88	89	90
91	92	93	94	95

A. CERVICAL SPINE

1. VIEWS TAKEN All Cervical Spine Within Normal Limits

AP Lat Flex L.Obl Other 1 _____
 APOM Vertex Ext R.Obl Other 2 _____

2. OSSEOUS INSPECTION

a. Degenerative Changes Within Normal Limits

OCC	Disc Height			Severity			Disc Wedging			Listhesis (Body Position)			Instability w/Stress		Foraminal Encroachment			Osteophyte / DJD		
	Mild	Moderate	Severe	Ant	LL	Post	Ant	LL	Post	Fix	Ext	Lt	Rt	Ant	LL	Post	Distruption Spri-Lam			
C1																				
C2	2/3	<	++	++	2/3	2/3	2/3	2/3	2	2	2	2	2/3	2/3	2/3	2/3	2			
C3	3/4	<	++	++	3/4	3/4	3/4	3/4	3	3	3	3	3/4	3/4	3/4	3/4	3			
C4	4/5	<	++	++	4/5	4/5	4/5	4/5	4	4	4	4	4/5	4/5	4/5	4/5	4			
C5	5/6	<	++	++	5/6	5/6	5/6	5/6	5	5	5	5	5/6	5/6	5/6	5/6	5			
C6	6/7	<	++	++	6/7	6/7	6/7	6/7	6	6	6	6	6/7	6/7	6/7	6/7	6			
C7	7/8	<	++	++	7/8	7/8	7/8	7/8	7	7	7	7	7/8	7/8	7/8	7/8	7			

3. LINES OF MENSURATION

1. A B
 C D

2. A B
 C D

3. A B
 C D

b. Cervical Curve

Well Maintained Reduced
 Straightened Mild
 Reversed Mod

c. Spinous Rotation-Region

None Lt Rt
 Mild Mod Sevr

d. Lateral Listing-Region

None Lt Rt
 Mild Mod Sevr

e. Posterior Ponticle

None Lt Rt

f. Spinal Compression Fractures

None Present At Level _____
Wedging: Anterior Lt Lat Rt Lat
 Step Defect Endplate Disruption
 Zone of Impaction (Radiopaque Band)

g. Lytic / Blastic Changes

None Present At Level _____
 Cortical Thick. Localized Inc. Density
 Moth-Eaten Diffuse Inc. Density
 Permeative Ivory Vertebra Sign

h. General Osteoporosis

None Mild Mod Sevr
 Without Fx Defect With Fx Defect

4. SOFT TISSUE ANOMALIES

None
 A B C D E F G H

5. OF ADDITIONAL NOTE/OBSERVATION

A B C D E F G H 1 2 3 4 5 6 7 8

B. THORACIC SPINE

1. VIEWS TAKEN All Thoracic Spine Within Normal Limits

AP Lat Swimmer's Other _____

2. OSSEOUS INSPECTION

a. Degenerative Changes Within Normal Limits

T	Disc Height			Disc Wedging			Listhesis			Osteophyte / DJD			
	Mild	Moderate	Severe	Ant	LL	Post	Ant	LL	Post	Ant	LL	Post	Distrip Spri-Lam
T1	1/2			1/2	1/2	1/2	1	1	1	1	1	1	1
T2	2/3			2/3	2/3	2/3	2	2	2	2	2	2	2
T3	3/4			3/4	3/4	3/4	3	3	3	3	3	3	3
T4	4/5			4/5	4/5	4/5	4	4	4	4	4	4	4
T5	5/6			5/6	5/6	5/6	5	5	5	5	5	5	5
T6	6/7			6/7	6/7	6/7	6	6	6	6	6	6	6
T7	7/8			7/8	7/8	7/8	7	7	7	7	7	7	7
T8	8/9			8/9	8/9	8/9	8	8	8	8	8	8	8
T9	9/10			9/10	9/10	9/10	9	9	9	9	9	9	9
T10	10/11			10/11	10/11	10/11	10	10	10	10	10	10	10
T11	11/12			11/12	11/12	11/12	11	11	11	11	11	11	11
T12	12/13			12/13	12/13	12/13	12	12	12	12	12	12	12

b. Thoracic Curve

Well Maintained Mild
 Hyperkyphotic Mod
 Hypokyphotic Sevr

f. Hypoplastic 12th Ribs

Lt Rt

c. Spinous Rotation-Regn.

None Lt Rt
 Mild Mod Sevr

d. Lateral Listing-Region

None Lt Rt
 Mild Mod Sevr

e. Scoliosis

Primary Lt Rt Mild Mod Sevr
Compens Lt Rt Mild Mod Sevr
Apex Level: 1/2 2/3 3/4 4/5
5/6 6/7 7/8 8/9 9/10 11/12

g. Spinal Compression Fractures

None Present At Level _____
Wedging: Anterior Lt Lat Rt Lat
 Step Defect Endplate Disruption
 Zone of Impaction (Radiopaque Band)

h. Lytic / Blastic Changes

None Present At Level _____
 Cortical Thick. Localized Inc Density
 Moth-Eaten Diffuse Inc. Density
 Permeative Ivory Vertebra Sign

i. General Osteoporosis

None Mild Mod Sevr
 Without Fx Defect With Fx Defect

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B. THORACIC SPINE - CONTINUED

3. LINES OF MENSURATION

1.	A B	C D
2.	A B	C D
3.	A B	C D

4. SOFT TISSUE ANOMALIES None

A B C D E F G H

5. OF ADDITIONAL NOTE/OBSERVATION

A B C D E F G H I	1 2 3 4 5 6 7 8

C. LUMBOSACRAL SPINE

1. VIEWS TAKEN All Lumbosacral Spine Within Normal Limits

AP
 Lat
 L.Obl
 R.Obl
 L5/S1 Spot
 AP Sac
 Lat Sac
 Other 1
 Other 2

2. OSSEOUS INSPECTION

a. Degenerative Changes Within Normal Limits

	Disc Height				Disc Wedging				Listhesis (Body Position)				Foraminal Encroachment				Facet Asym				Osteophyte / DJD				Disruption Spr.Lam		Spondylosis					Spondylo- listhesis				
	1/2	Mild	Moderate	Severe	Ant	LL	RL	Post	Ant	LL	RL	Retro	Left	Right	Left	Right	Ant	LL	RL	Post	Disruption	Spr.Lam	Left	Right	1	2	3	4	5	I	II	III	IV	V		
L1	1/2	<	>	>>	1/2	1/2	1/2	1/2	1	1	1	1	1/2	1/2	1	1	1	1	1	1	1	L1	1	1	1	2	3	4	5	1	1	1	1	1		
L2	2/3	<	>	>>	2/3	2/3	2/3	2/3	2	2	2	2	2/3	2/3	2	2	2	2	2	2	2	L2	2	2	2	3	4	5	2	2	2	2	2			
L3	3/4	<	>	>>	3/4	3/4	3/4	3/4	3	3	3	3	3/4	3/4	3	3	3	3	3	3	3	L3	3	3	3	4	5	3	3	3	3	3				
L4	4/5	<	>	>>	4/5	4/5	4/5	4/5	4	4	4	4	4/5	4/5	4	4	4	4	4	4	4	L4	4	4	4	5	4	4	4	4	4					
L5	5/1	<	>	>>	5/1	5/1	5/1	5/1	5	5	5	5	5/1	5/1	5	5	5	5	5	5	5	L5	5	5	5	5	5	5	5	5	5					
S1															S1	S1																				

b. Lumbar Curve

Well Maintained
 Mild
 Hyperlordotic
 Mod
 Hypolordotic
 Sevr

g. Transitional Segment

Lumbarization of S1
 Sacralization of L5
 Spatulization of L5
 Lt
 Transverse Processes
 Rt

c. Spinous Rotation-Region

None
 Lt
 Rt
 Mild
 Mod
 Sevr

d. Lateral Listing-Region

None
 Lt
 Rt
 Mild
 Mod
 Sevr

e. Scoliosis

	Lt	Rt	Mild	Mod	Sevr
Primary	1	1	1	1	1
Compens	1	1	1	1	1

Apex Level: 1/2 2/3 3/4 4/5

f. # Vertebrae Visualized

4
 5
 6

h. Spinal Compression Fractures

None
 Present At Level _____
 Wedging: Anterior
 Lt Lat
 Rt Lat
 Step Defect
 Endplate Disruption
 Zone of Impaction (Radiopaque Band)

i. Lytic / Blastic Changes

None
 Present At Level _____
 Cortical
 Localized Inc. Density
 Moth-Eaten
 Diffuse Inc. Density
 Permeative
 Ivory Vertebra

j. General Osteoporosis

None
 Mild
 Mod
 Sevr
 Without Fx Defect
 With Fx Defect

3. LINES OF MENSURATION

1.	A B	C D
2.	A B	C D
3.	A B	C D

4. SOFT TISSUE ANOMALIES None

A B C D E F G H

5. OF ADDITIONAL NOTE/OBSERVATION

A B C D E F G H I	1 2 3 4 5 6 7 8

D. FURTHER RECOMMENDATIONS

None
 Re-Xray in: _____
 Follow-up Diagnostic Testing
 Clinical Correlation
 MRI: Cerv
 Thor
 Lumb
 ROHNP
 CT Scan: Cerv
 Thor
 Lumb

Other A B C