Supplementary materials 2: MRI in T2 weighted STIR sequence. Axial view of L3-L4 (upper image) and L4 (middle image); and coronal view (lower image). SAFJ (dotted arrow, upper image) presumed to be due to *Mycobacterium tuberculosis* with a psoas abscess (full arrow, middle and lower images) communicating with left L3-L4 interapophyseal joint via a fistula (red arrow, upper image).





