

DEPARTMENT OF IMAGING & INTERVENTIONAL RADIOLOGY

Patient Name:	Mr. Dinesh Nair	MR No:	BH224927
Age/Sex:	43 Y / Male	Test id	RAD288211
Prescribed by:	Bansal Hospital	Test Date:	24-12-2019 13:19
Referred By:			

MRI BRAIN WITH MR VENOGRAM WITH CONTRAST

Technique: MRI study of brain was performed on high field 3T MRI, using spin echo T1, T2, Flair, gradient and DWI sequences in multiple planes. Followed by post contrast T1 in multiple planes. MR venogram was done on high field 3T MRI using 2D TOF, reconstruction done and evaluated in multiple planes.

Findings:**MR BRAIN**


- Tiny foci of T2/FLAIR hyperintensity measuring 2.5x2.5 mm in right peri-sylvian frontal subcortical white matter. It is showing no significant contrast enhancement and perifocal edema consistent with subtotally resolved NCC.
- Ventricular shunt seen in situ placed from right high parietal region with distal tip of shunt seen in right frontal horn.
- Mild residual asymmetrical hydrocephalus seen, left >right.
- Surgical craniotomy with replaced bony flap seen in left fronto-parieto-temporal bone region.
- Rest of bilateral cerebral parenchyma normal in intensity pattern with maintained gray-white matter morphology.
- Basal ganglia, thalami, brain stem & cerebellum show normal MR morphology and signal intensity.
- No mass effect or shift of mid-line structures is seen.

MR VENOGRAM

- Diffuse hypoplastic of left transverse sinus with resulting small caliber of left sigmoid sinus and IJV.
- Superior sagittal, straight, right transverse and right sigmoid sinuses are normal.
- Right IJV appears normal.

Impression: MR study reveals:

- Tiny foci of T2/FLAIR hyperintensity measuring 2.5x2.5 mm in right peri-sylvian frontal subcortical white matter. It is showing no significant contrast enhancement and perifocal edema consistent with subtotally resolved NCC.
- Ventricular shunt in situ placed from right high parietal region with distal tip of shunt seen in right frontal horn.
- Mild residual asymmetrical hydrocephalus, left >right.
- Surgical craniotomy with replaced bony flap in left fronto-parieto-temporal bone region.
- Diffuse hypoplastic of left transverse sinus with resulting small caliber of left sigmoid sinus and IJV.

Advice - Clinical correlation.


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