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CMO Reg. No. RMEE 2445133 NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name Age/Gender

: Mr.SAGEER AHMAD

: 60 Y/M

Lab No

: 10132029

Referred By Refer Lab/Hosp : Dr.AM KAR

: CHARAK NA

Visit No

: CHA250034733

Registration ON

: 26/Feb/2025 12:22PM

Sample Collected ON

: 26/Feb/2025 12:22PM

Sample Received ON Report Generated ON

: 26/Feb/2025 03:14PM

<u>MRI: BRAIN</u>

IMAGING SEQUENCES (NCMR)

AXIAL: SWI, DWI, T1, FLAIR & TSE T2 Wis. SAGITTAL: T2 Wis. CORONAL: FLAIR Wis.

Cortical sulci are seen prominent in both cerebral hemispheres with prominence of bilateral lateral and third ventricle — diffuse cerebral atrophy.

T2 and TIRM hyperintensities are noted in the periventricular white matter of both cerebral hemispheres — ischemic demyelinating changes.

Few old lacunar infarcts are seen in bilateral gangliocapsular, corona radiata and pons.

Small T2/TIRM hyperintensity showing restriction in DWI is seen in periventricular white matter of right parietal lobe — acute lacunar infarct.

Rest of the cerebral hemispheres shows normal MR morphology, signal intensity and gray - white matter differentiation. The thalami and corpus callosum are showing normal signal intensity pattern. Septum pellucidum and falx cerebri are i<mark>n midline. No m</mark>ass effect or midline shift is seen.

Brain stem and cerebellar hemispheres are showing normal morphology, signal intensity and outline. Fourth ventricle is normal in size and midline in position.

Major intracranial dural venous sinuses are showing normal outline and flow void.

Sella, supra-sellar and para-sellar structures are normally visualized.

IMPRESSION:

- Diffuse cerebral atrophy with ischemic demyelinating changes.
- Few old lacunar infarcts in bilateral gangliocapsular, corona radiata and pons.
- Acute lacunar infarct in periventricular white matter of right parietal lobe.

Please correlate clinically.

DR. RAVENDRA SINGH

MD

Transcribed by R R...

*** End Of Report ***

