

Patient Name	: Mr. SAGAR SINGH	Visit No	: CHA250036005
Age/Gender	: 32 Y/M	Registration ON	: 28/Feb/2025 10:16AM
<b>Lab No</b>	<b>: 10133301</b>	Sample Collected ON	: 28/Feb/2025 10:16AM
Referred By	: Dr. CAPF	Sample Received ON	:
Refer Lab/Hosp	: CAPF (GC) BILLING	Report Generated ON	: 28/Feb/2025 11:25AM

## **MRI: BRAIN**

### **IMAGING SEQUENCES (NCMR)**

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

Small [approx. 17 (vertical) x 18 (A.P) x 20mm (Trans)] well defined T2 hypointense/T1 hyperintense scalp swelling is seen in midline parietal region. No DWI hyperintensity is seen within the lesion. No bony erosion or intracranial extension is seen.

Multiple small T2/TIRM hyperintensities are seen in bilateral fronto-parietal subcortical white matter — suggestive of microangiopathic ischemic changes. No fresh infarct is seen on DWI.

Rest of the cerebral hemispheres shows normal MR morphology, signal intensity and gray - white matter differentiation. The basal nuclei, thalami and corpus callosum are showing normal signal intensity pattern. Both lateral ventricles and third ventricle are normal in size shape and outline. Septum pellucidum and falx cerebri are in midline. No mass effect or midline shift is seen. Supratentorial sulcal and cisternal spaces are normally visualized.

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:**

- **Small well defined scalp swelling in midline parietal region — likely benign. No intracranial extension is seen.**
- **Microangiopathic ischemic changes in bilateral fronto-parietal subcortical white matter.**

Please correlate clinically.

**DR. GAURAV LUTHRA**  
**MD**

Transcribed by R R...

\*\*\* End Of Report \*\*\*

