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| Patient Name | : Ms.SAVITA DEVI | Visit No | : CHA250038478 |
| Age/Gender | : 60 Y/F | Registration ON | : 03/Mar/2025 06:38PM |
| Lab No | : 10135773 | Sample Collected ON | : 03/Mar/2025 06:38PM |
| Referred By | : Dr.RBH | Sample Received ON | : |
| Refer Lab/Hosp | : CHARAK NA | Report Generated ON | : 03/Mar/2025 07:26PM |

MRI: BRAIN

IMAGING SEQUENCES (NCMR)

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

Cortical sulci are seen mild prominent in both cerebral hemispheres with prominence of bilateral lateral and third ventricle- Mild diffuse cerebral atrophy. No fresh infarct is seen on DWI.

Mild diffuse cerebellar atrophy is noted with mild prominence of cerebellar folia.

Rest of the cerebral hemispheres show normal MR morphology, signal intensity and gray - white matter differentiation. The basal nuclei, thalami and corpus callosum are showing normal signal intensity pattern. Septum pellucidum and falx cerebri are in midline. No mass effect or midline shift is seen.

Brain stem is 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.

Partial empty sella is seen. Supra-sellar and para-sellar structures are normally visualized.

Mucosal thickening is seen in right maxillary sinus-sinusitis.

Screening of cervical spine was done which reveals degenerative changes with small disc osteophyte complex at C3-4, C4-5, C5-6 & C6-7 levels.

IMPRESSION:

Mild diffuse cerebral & cerebellar atrophy.

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Typed by Ranjeet

*** End Of Report ***

