

Patient Name	: Ms.RAHMATUN NISA	Visit No	: CHA250038728
Age/Gender	: 50 Y/F	Registration ON	: 04/Mar/2025 09:52AM
Lab No	: 10136023	Sample Collected ON	: 04/Mar/2025 09:52AM
Referred By	: Dr.ST AGHA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 04/Mar/2025 11:55AM

CT STUDY OF HEAD

Infratentorial

- Cerebellopontine angle and prepontine cisterns are seen normally.
- Fourth ventricle is normal in size and midline in location.
- Cerebellar parenchyma and rest of the brain stem appear to be normal.

Supratentorial

- Cortical sulci are prominent.
- Intra-parenchymal blood attenuation hyperdensity measuring Approx 21x20x33mm with volume approx 7-8cc is seen in right thalamo-capsular and ganglio-capsular regions with minimal to mild surrounding edema . It is reaching upto right crus cerebri. Intraventricular extension is seen in the form of blood attenuation content in right lateral ventricle .
- *Persistent cavum septum pellucidum et vergae is seen .*
- Chronic lacunar infarct is seen in right ganglio-capsular region.
- Third and left lateral ventricles are normal in size. Paraventricular white matter hypodensities are seen .
- Basal cisterns are clear.
- No midline shift is seen.

IMPRESSION:

ACUTE INTRA PARENCHYMAL HEMATOMA IN THALAMO-CAPSULAR AND GANGLIO-CAPSULAR REGION WITH INTRAVENTRICULAR EXTENSION .

DIFFUSE CEREBRAL ATROPHY WITH WHITE MATTER ISCHEMIC CHANGES.

CHRONIC LACUNAR INFARCT IN RIGHT GANGLIO-CAPSULAR REGION.

Clinical correlation is necessary.

[DR. JAYENDRA KUMAR, MD]

TRANSCRIBED BY: ANUP

*** End Of Report ***



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