

Patient Name	: Mr.YASH MAURYA	Visit No	: CHA250045103
Age/Gender	: 11 Y/M	Registration ON	: 13/Mar/2025 11:21AM
<b>Lab No</b>	<b>: 10142398</b>	Sample Collected ON	: 13/Mar/2025 11:21AM
Referred By	: Dr.ML BHARGAV	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 13/Mar/2025 05:04PM

## **MRI: BRAIN**

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

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

Small ring like intra-axial lesion is seen in right superior frontal lobe in sub-pial location. Core of the lesion is showing hyperintense signal on T2 W images & hypointense signal on T1 W images. Moderate perifocal edema is observed. Minimal mass effect is seen in form of effaced adjacent sulcal spaces. Features are suggestive of inflammatory granuloma.

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 midline shift is seen. Rest of the 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.

*Mucosal thickening is seen in right maxillary sinus-sinusitis.*

## **IMPRESSION**

- **Inflammatory granuloma in right superior frontal lobe – ? degenerating neurocysticercus (d/d includes : tuberculoma).** Adv: contrast study & follow up.

Please correlate clinically.

**DR. RAVENDRA SINGH**  
**MD**

Typed by Ranjeet

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

