

Patient Name	: Ms.SHEELA DUBEY	Visit No	: CHA250046368
Age/Gender	: 60 Y/F	Registration ON	: 16/Mar/2025 12:57PM
Lab No	: 10143663	Sample Collected ON	: 16/Mar/2025 12:57PM
Referred By	: Dr.SAMIR GUPTA	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 16/Mar/2025 02:05PM

MRI: BRAIN

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.

Diffuse cerebellar atrophy is seen with prominent folia.

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

Two small T2/TIRM hyperintense areas showing restriction on DWI are noted involving left basal ganglia and centrum semi-ovale — Acute lacunar infarcts.

Bilateral basal ganglionic calcifications are seen.

A small well defined extra-axial lesion measuring approx. 14 (AP) x 12 (TR) x 12 mm (CC) is seen in left frontal region showing hypointense signal on T2 and blooming on SWI. No perifocal edema or mass effect is seen.

A small well defined T2 hyperintense, T1/TIRM hypointense lesion is seen in right parietal lobe. No restriction on DWI or blooming on SWI is seen. No perifocal edema or gliosis is noted – Neuroglial cyst / Prominent VR space.

Rest of the cerebral hemispheres show normal MR morphology, signal intensity and gray - white matter differentiation. Rest of 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. 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.

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



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IMPRESSION:

- **Diffuse cerebral & cerebellar atrophy with ischemic demyelinating changes.**
- **Acute lacunar infarcts in left basal ganglia and centrum semi-ovale.**
- **Small well defined extra-axial lesion in left frontal region - ? Calcified meningioma (ADV : Contrast study).**

Please correlate clinically.

**DR. RAVENDRA SINGH
MD**

(Transcribed by Rachna)

*** End Of Report ***

CHARAK

