





## INVESTIGATION REPORT

Patient Name: Mrs. Mst Ajufa Khatun	Location	: BLK Hospital
Age/Sex : 71 Year(s)/ F/Female	IP No	:
MaxId : BLKH.1203133	Order Date	: 23/04/2024
Ref. Doctor : Rohit Bansil	Report Date	: 24/04/2024

### MRI Brain (Contrast)

Axial T1 and FSE T2-weighted sections of the brain were obtained on a 1.5 Tesla scanner and correlated with coronal FLAIR, sagittal FSE T2, axial SWI and diffusion weighted images. Post IV gadolinium SE - T1W sections in sagittal, axial and coronal planes. 10 ml IV Dotarem was administered with no contrast reaction noted. Post contrast T1FS sagittal, axial and coronal sequences were obtained.

Clinical details: C/o headache.

#### Findings:

The study shows a lobulated dural based lesion in right para-sagittal location in frontal lobe. Size of the lesion is 38x26x15 mm (AP x TR x CC). The lesion is appearing as mixed intensity signal on T2 and FLAIR with hypointense signal on T1. No obvious GRE blooming is seen. No significant diffusion restriction is seen. Post-contrast study shows homogenous post-contrast enhancement with mildly thickened and enhancing dura along the margins.

Significant perilesional edema is seen extending upto the parieto-occipital lobe and corpus callosum with mildly effaced right lateral ventricle and midline shift of approx. 8-9 mm towards the left side.

Diffuse cerebral atrophy is seen with prominent ventricular system and sulcal spaces.

There are few discrete T2 FLAIR hyperintensities are seen in bilateral subcortical and periventricular white matter in bilateral fronto-parietal regions - chronic ischemic microangiopathic changes.

Rest of the brain parenchyma is unremarkable.

The major intra cranial vessels of the circle of the Willis and dural venous sinuses reveal normal flow voids.

Soft tissues of both orbits are unremarkable.

#### IMPRESSION: MR findings reveal:-

- A lobulated dural based lesion in right para-sagittal location in frontal lobe, as described above, which is appearing as mixed intensity signal on T2 and FLAIR with hypointense signal on T1. No obvious GRE blooming or significant diffusion restriction noted. Post-contrast study shows homogenous post-contrast enhancement with mildly thickened and enhancing dura along the margins -differential includes right parafalcine meningioma.
- Significant perilesional edema noted extending upto the parieto-occipital lobe and corpus callosum with mildly effaced right lateral ventricle and midline shift of approx. 8-9 mm towards the left side.

(For Interpretation by a Registered Medical Practitioner Only)

Version: 1.0

Page 1 of 2





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### MRI Brain (Contrast)

- Diffuse cerebral atrophy with chronic ischemic microangiopathic changes.

Please correlate clinically.

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Page 2 of 2

