



<i>Patient Name</i>	XXXXX XXXXX	<i>Patient ID</i>	896756
<i>Age/D.O.B</i>	30 Y	<i>Gender</i>	F
<i>Referring Doctor</i>	XXXXXXX XXX	<i>Date</i>	29 Sep 23

MRI BRAIN PLAIN

History

Headache from last two months with hallucinations.

Technique

Technique: Axial, coronal, and sagittal T1, T2, and PD images of the brain were obtained with and without fat suppression.

Observations

Mild cortical atrophy is noted, with prominence of the sulci and ventricles.

No acute infarct or hemorrhage is seen.

No mass effect or midline shift is identified.

The gray-white matter differentiation is preserved.

Normal signal intensity is observed in the basal ganglia, thalami, brainstem, and cerebellum.

The corpus callosum, pituitary gland, and pineal region appear normal in morphology and signal intensity.

No evidence of abnormal meningeal enhancement.

The ventricular system is of normal size and configuration.

No evidence of extra-axial fluid collections.

Flow voids are seen in major intracranial arteries, suggesting patency.

Paranasal sinuses and mastoid air cells are clear.

Impression

Mild cortical atrophy.

No evidence of acute infarct, hemorrhage, or mass lesion.

Normal intracranial structures and flow voids in the major vessels

Reported By,

XXXXXXXX XXXXXX

MBBS, MD
Consultant Radiologist
Reg No.xxxxxxxx

Key Images

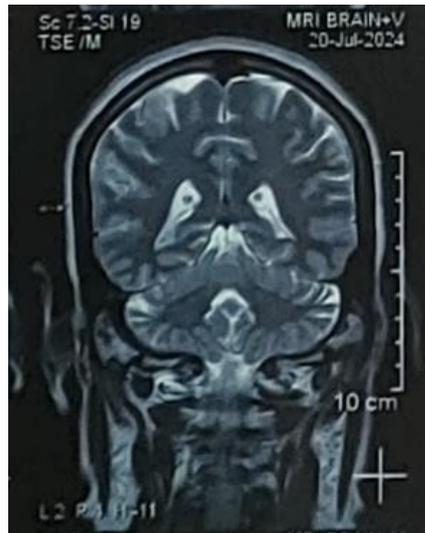


Image 1

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