Name: Beth Cartrette | DOB: 9/13/1982 | MRN: 4179018 | PCP: Timothy P Kennard, MD | Legal Name: Jennifer Beth Cartrette

MRI ORBITS WO W CONTRAST

Collected on February 25, 2018 8:13 PM

Novant Health

Gina LiCause 02/25/2018, 10:00 PM

The MRI does show slight prominence of the right more than left eye (but not clearly Graves) and with the abnormalities of the thyroid labs, I would like her to see Dr Talip for her recommendations. Once she is aware, please make this referral. We may also try to call you regarding this. We will need documentation that you have received these instructions. Take care, Dr. LiCause

Gina LiCause 02/26/2018, 10:38 PM

I am afraid I don't know the answer, but if Dr Talip does not feel this is related to Graves, we will have her see an ENT. Thank you.

Results

Impression

IMPRESSION: Orbital asymmetry as described. No definite orbital mass lesion on the right. Question mild old medial orbital wall injury on the left. Left sphenoethmoidal opacification also noted.

Narrative

HISTORY: Proptosis.

COMPARISON: None.

Multisequence, multiplanar images were performed on a high field MRI through the orbits before and after the uneventful ministration of 6 cc Gadavist IV.

There is slight orbital asymmetry with the right globe protruding further than the left. I see no intra or extraconal mass lesion to account for this, and the orbital fat is preserved. The extraocular muscles are unremarkable. Slight asymmetric inward bowing of the left medial orbital wall suggests a possible remote left orbital injury. There is also opacification of a left posterior ethmoid cell with opacification of adjacent portions of a

septated left sphenoid cell. Mild mucosal thickening is seen elsewhere within the ethmoids. No fluid level.

The visualized intracranial structures are unremarkable.

Authorizing provider: Gina LiCause Reading physician: Robert Barr

Study date: February 25, 2018 8:16 PM Collection date: February 25, 2018 8:13 PM Result date: February 25, 2018 8:16 PM

Result status: Final

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