

Patient Name :	JAK	Patient ID :	IP0000111111
Patient age / Sex :	067Y / M	Modality :	MR
Referring Physician :	DR.EFR PHYSICIAN B BLOCK	Report Date / Time :	20 April 2021 12:30:04

MRI BRAIN PLAIN STUDY

TECHNIQUE:

T1, T2 & FLAIR Axials, T2 Sagittals / Coronals. DWI Axials.

Clinical details : S/p CABG for CAD.

FINDINGS:

Evidence of multiple lacunar & tiny sized lesions with restricted diffusion and low ADC values are hyperintense on FLAIR images noted in both cerebellar hemispheres, occipital lobes and parietooccipital regions (including right side of splenium of corpus callosum), left posterior periventricular white matter, left posterior temporal lobe, left frontal corona radiata & centrum semiovale, left high parietal cortex and right side corona radiata, centrum semiovale and high parietal cortex and as a tiny lesion in lateral wall of the frontal horn of right lateral ventricle.

Rest of the cerebral parenchyma is normal.

Both lateral and third ventricles are mildly dilated.

Bilateral sylvian fissures, cerebral sulcal spaces and basilar cisternal spaces are widened.

Pons, medulla and midbrain are normal.

No shift of midline structures.

Pituitary gland, infundibulum and optic chiasm are normal.

No hemorrhagic pathology.

Screening MR Angio : Normal major intracranial arteries.

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IMPRESSION:

- * **Multiple tiny & lacunar sized non hemorrhagic acute infarcts in bilateral cerebellar hemispheres, occipital lobes & parietooccipital regions (including right side of splenium of corpus callosum), left sided posterior periventricular white matter, posterior temporal lobe, frontal corona radiata, centrum semiovale, high parietal cortex and right sided corona radiata, centrum semiovale, high parietal cortex and lateral wall of the frontal horn of right lateral ventricle -- *Embolic etiology*.**
- * **Age related mild cerebral atrophy.**

For clinical correlation.

krish ma

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