

Results

MR Brain W/IV Contrast ONLY
MR Entire Spine W/ IV Contrast ONLY

Study Result

MR BRAIN, WITH CONTRAST:

MRI CERVICAL, THORACIC, AND LUMBAR SPINE, WITH CONTRAST:

CLINICAL INDICATION: Brain tumor, needing surgical guidance.

TECHNIQUE:

BRAIN: Following intravenous contrast administration, axial volumetric T1 gradient echo and 3D TSE T2 imaging were performed through the entire brain on a 3.0 Tesla system.

SPINE: Following uneventful intravenous contrast administration, sagittal T1 FLAIR, sagittal T2, and axial T1 FLAIR were performed on a 3.0 Tesla system.

COMPARISON: Brain MR , Spine MRI

FINDINGS:

BRAIN:

Allowing for differences in technique, there has been no significant interval change since the recent brain MRI exam.

Again noted are changes related to left frontal craniotomy with expected underlying dural thickening and enhancement.

Within the resection bed, a cluster of enhancing nodules including a dominant nodule and 3 adjacent smaller enhancing nodules are again seen. Surrounding confluent nonenhancing FLAIR hyperintensity is essentially unchanged.

The ventricles are stable in size and configuration noting mild ex-vacuo dilatation of the left lateral ventricle.

The visualized major intracranial arterial flow voids are present. No definite abnormality is seen in the visualized portions of the orbits.

Mild mucosal thickening of the posterior ethmoid air cells is seen. The middle ear cavities, mastoid air cells, and paranasal sinuses are otherwise clear.

SPINE:

There is a full complement of cervical, thoracic, and lumbar vertebrae. The vertebrae and intervertebral discs are normal in size and signal. No areas of abnormal enhancement is identified following contrast administration.

The spinal cord is normal in size and signal. The cervicomedullary

junction is unremarkable. The conus medullaris is normal in shape and terminates at the L1-L2 level. The cauda equina and filum terminale are unremarkable.

The paraspinal soft tissues are unremarkable. The bladder is distended. The kidneys are orthotopic and without hydronephrosis.

IMPRESSION

BRAIN:

Successful completion of surgical guidance protocol. No significant change in the enhancing nodules within the surgical bed consistent with recurrent neoplasm.

SPINE:

No MRI evidence for leptomeningeal metastases within the thecal sac.

END OF IMPRESSION:

Narrative

~~Preliminary report~~ MR BRAIN, WITH CONTRAST:

MRI CERVICAL, THORACIC, AND LUMBAR SPINE, WITH CONTRAST:

-

CLINICAL INDICATION: Brain tumor, needing surgical guidance.

-

TECHNIQUE:

-

BRAIN: Following intravenous contrast administration, axial volumetric T1 gradient echo and 3D TSE T2 imaging were performed through the entire brain on a 3.0 Tesla system.

-

SPINE: Following uneventful intravenous contrast administration, sagittal T1 FLAIR, sagittal T2, and axial T1 FLAIR were performed on a 3.0 Tesla system.

-

COMPARISON: Brain MR Spine MRI

-

FINDINGS:BRAIN:

- Allowing for accession number -differences in technique, there has been dictated by
-Final Report pending review by - no
significant interval change since the recent brain MRI exam.

- Again noted are changes related to left frontal craniotomy with
expected underlying dural thickening and enhancement.

- Within the resection bed, a cluster of enhancing nodules including
a dominant nodule and 3 adjacent smaller enhancing nodules are
again seen. Surrounding confluent nonenhancing FLAIR
hyperintensity is essentially unchanged.

- The ventricles are stable in size and configuration noting mild
ex-vacuo dilatation of the left lateral ventricle.

- The visualized major intracranial arterial flow voids are present.
No definite abnormality is seen in the visualized portions of the
orbits.

- Mild mucosal thickening of the posterior ethmoid air cells is
seen. The middle ear cavities, mastoid air cells, and paranasal
sinuses are otherwise clear.

SPINE:

- There is a full complement of cervical, thoracic, and lumbar
vertebrae. The vertebrae and intervertebral discs are normal in
size and signal. No areas of abnormal enhancement is identified
following contrast administration.

- The spinal cord is normal in size and signal. The cervicomedullary
junction is unremarkable. The conus medullaris is normal in shape
and terminates at the L1-L2 level. The cauda equina and filum
terminale are unremarkable.

- The paraspinal soft tissues are unremarkable. The bladder is
distended. The kidneys are orthotopic and without hydronephrosis.

ImpressionBRAIN:

- Successful completion of surgical guidance protocol. No
significant change in the enhancing nodules within the surgical
bed consistent with recurrent neoplasm.

SPINE:

-

No MRI evidence for leptomeningeal metastases within the thecal sac.

-

END OF IMPRESSION:

Order Report



Order Details