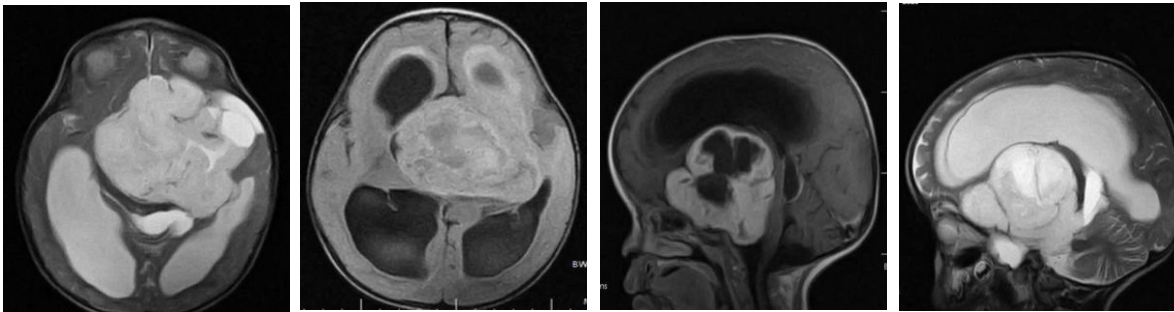


Central Nervous System: Case 3 cont.

Prompt

Generate a radiology report for these abdominal brain MRIs.



GPT-4V

Brain MRI - Axial and Sagittal Views

Clinical Indication: Not provided.

Technique: Multiple sequences of axial and sagittal images of the brain.

Findings:

1. **Brain Parenchyma:** The brain parenchyma appears largely intact. No evidence of significant mass effect or midline shift observed.
2. **Lesions:** There is a hyperintense lesion in the central region, possibly the region of the ventricles. The exact nature of the lesion is not clear from the images provided. Further sequences or contrast enhancement might be required for better characterization.
3. **Ventricles:** The ventricular system appears to be slightly enlarged, suggestive of some degree of hydrocephalus. The exact cause and type of hydrocephalus would need to be determined.
4. **Cerebellum and Brainstem:** No significant abnormalities are readily apparent in the cerebellum or brainstem.
5. **Sinuses:** Paranasal sinuses are not fully visualized in these cuts.

Impression:

1. Hyperintense lesion in the central region of the brain, further characterization required.
2. Possible hydrocephalus with enlarged ventricular system.

Recommendation: Correlation with clinical symptoms and further imaging, possibly with contrast, is recommended for a definitive diagnosis. A consultation with a neuroradiologist or neurosurgeon is advised for expert opinion. Please note, this is a general observation and not a definitive diagnosis. Always consult with a certified radiologist or physician for accurate interpretation and management.

Reference answer

A large sellar-suprasellar well-marginated lobulated necrotic solid mass that is heterogeneous T2/FLAIR hyperintense and hypointense on T1WI. The solid component demonstrates enhancement on T1 C+ sequences. The mass superiorly projects into the third and lateral ventricles (left>right) to cause severe obstructive hydrocephalus. Subependymal edema and peripheral effacement of cerebral sulcations is demonstrated.