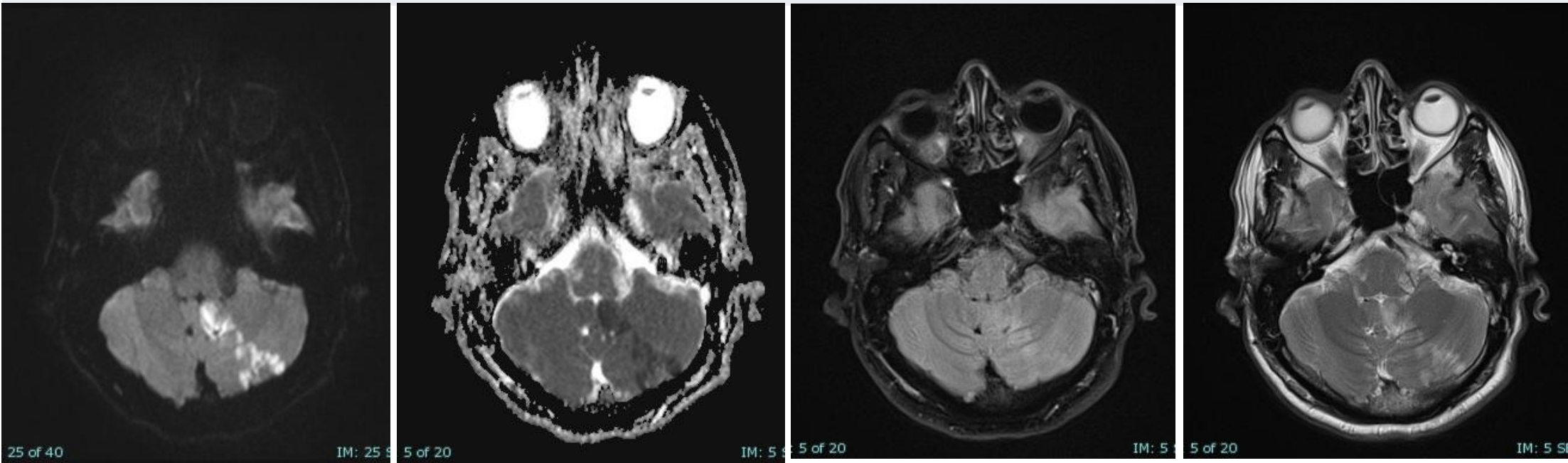


Prompt

This is a 45-year-old male presented with right-sided weakness, slurred speech, and a decreased level of consciousness. Please generate a radiology report for these MRI scans.



GPT-4V

MRI Brain – Axial View

Clinical History:

45-year-old male with right-sided weakness, slurred speech, and decreased level of consciousness.

Technique: Axial T1, T2, and FLAIR sequences of the brain.

Findings:

- There appear to be areas of hyperintensity on the T2 and FLAIR sequences, which may suggest areas of edema or altered signal characteristics, particularly in the left cerebral hemisphere. This could correlate with the right-sided symptoms given the contralateral control of the brain.
- No obvious space-occupying lesions, midline shift, or evidence of acute hemorrhage is evident on the provided images.
- The ventricular system appears within normal limits for age. No hydrocephalus.
- Basal ganglia and thalamic regions are intact.
- The cerebellum and brainstem appear unremarkable on the provided images.

Impression:

- Areas of hyperintensity in the left cerebral hemisphere which could suggest ischemic changes, edema, or other pathological processes. This could be consistent with an acute or subacute ischemic event, given the clinical history.
- No evidence of hemorrhage, mass effect, or midline shift on the provided images.

Reference answer

- There is an area of restricted diffusion involving the inferomedial side of the left cerebral hemisphere, including the vermis, measuring about 5 x 1 cm and representing acute infarction.
- There was no hemorrhagic transformation.
- Loss of signal void in the left vertebral artery suggests thrombosis.
- Multiple bilateral T2/FLAIR hyperintensities were seen involving the periventricular and subcortical white matter without diffusion restriction or mass effect,