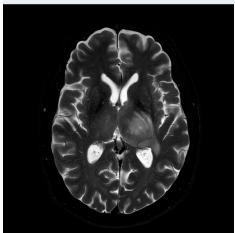
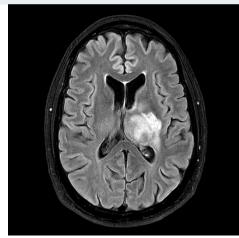
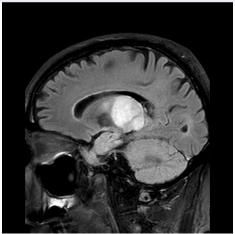
# **Oncology: Case 4**

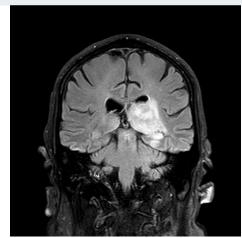
#### **Prompt**

Please generate a structural report according to these images.









# **GPT-4V**

#### **Findings:**

# Axial Image (first image):

The first image appears to show an axial section of the brain.

There seems to be a hyperintense lesion (bright area) located in the region of the right basal ganglia and extending toward the right lateral ventricle. This could represent various pathologies such as a tumor, cyst, or other lesion. The exact nature would require further evaluation and clinical correlation.

Sagittal Image (second image):

The second image provides a sagittal view of the brain.

Again, the lesion observed in the axial view is evident, extending from the region of the basal ganglia toward the lateral ventricle.

The corpus callosum, cerebellum, and brainstem appear within normal limits at this slice.

Coronal Image (third image):

The third image appears to be a coronal section of the brain.

The lesion in the right basal ganglia area is again evident. It appears hyperintense compared to surrounding brain tissue.

Ventricular system appears symmetrical, with no overt signs of hydrocephalus or midline shift.

# Axial Image (fourth image):

Another axial image of the brain, possibly at a different sequence or weighting.

Bilateral basal ganglia and thalami are visualized. The previously mentioned lesion is not as conspicuously bright in this image, suggesting it might be more evident on particular MRI sequences.

# Impression:

A hyperintense lesion in the region of the right basal ganglia extending toward the right lateral ventricle is evident. The differential diagnoses include neoplastic lesions, vascular malformations, and certain types of cysts or abscesses, among others. Further imaging, such as contrast-enhanced sequences or other modalities, might be required for a more definitive diagnosis. Clinical correlation and a detailed evaluation by a radiologist are essential.

# Reference answer

There is an ill-defined hyperintense T2/FLAIR signal mass within the left corona radiata and thalamus, with inferior extension of signal abnormality into the left optic radiation and left temporal stem. There is gyriform/subcortical hyperintense T2/FLAIR signal within the left medial and anterior temporal lobe. There is evidence of local mass effect with effacement of the posterior body of the left lateral ventricle and third ventricle.