

Start Patient : Ho, Ling
11 Neath Street, MONT ALBERT VIC 3127
Birthdate: 27/04/1945 Age: Y79 Sex: F

Your Reference : 64.621419
From : BH
Medicare Number:

Referred by : Mr Sor Way Chan
Addressee : Mr Sor Way Chan 215257RJ

Start of Result:
Requested : 03/12/2024
Collected : 09/12/2024 00:00
Name of Test : MRI Head (No Rebate)
Reported : 09/12/2024 16:20

Patient ID: 64.621419
Mr Sor Way Chan Order: 64.1652384_1
Folio:
UR Number:

Patient Details: HO, Ms Ling ID: 64.621419
DOB: 27/04/1945 Gender: F Acc No: 64.1652384
11 Neath Street MONT ALBERT VIC UR Number:
3127

Report To: MR S CHAN COPIES TO:
Elgar Hills Medical Suites, Dr Leila Matindoost
Suite 1, 28-32 Arnold Street
BOX HILL VIC 3128

Exam Date: Monday, 09 December 2024
Site: Imaging Associates Box Hill
Address: Level 1 116-118 Thames Street
Box Hill VIC 3128
Phone: 0388437999

MRI BRAIN

Clinical Notes:
A 79 year old presents with right sensory neural hearing loss. This has resolved. Balance issues.

Technique:
Sagittal T1, axial FLAIR, T2, DWI and coronal T2 weighted scans obtained of the brain. Axial SWI scans and thin slice T2 DRIVE scans were obtained through the brain and posterior fossa.

Findings:
There is punctate white matter change in the frontal and parietal lobes bilaterally. None of these areas show diffusion restriction. Appearances

support

microvascular ischaemia. No established large nor small vessel infarct is

evident. The white matter of the posterior fossa is better maintained.

Centrally within the mid brain is a presumed microhaemorrhage. Elsewhere there

are tiny microhaemorrhages. These lie in the right precentral gyrus and in the

cortex of left frontal lobe.

The VII and VIII cranial nerves have a normal appearance in the retrocochlear

region. There is no dehiscence of the semicircular canals.

There is no retro-orbital nor suprasellar mass. There is generalised prominence

of the cerebral sulci and ventricles. A cavum septum pellucidum is noted.

There

is no facial sinus disease. Normal flow voids are seen in the major cerebral

vessels.

Comment:

1. Moderate microvascular ischaemic change affecting the right and left

frontal and parietal lobes. 2. No infarct. 3. No acoustic neuroma. 4.

Several small microhaemorrhages as described. No acute change.

Electronically signed by: Dr Paul Marks at 5:10 PM Mon, 9 Dec 2024

End of Report :