

John Doe

MRN: 5555-5432-1234

Referring Physician: Dr. Summers



Facility: South Tampa Imaging

Sex: M

Scan Date: 2026-01-12

Age: 24.5 years

Scan Time: 07:00

Height: 6'0"

Scan Type: Brain MRI

Weight: 175 lbs

DOB: 2001-06-28



Brain Parenchyma

Mild Findings

No acute infarct, hemorrhage, or mass effect.

Normal gray-white matter differentiation.

Scattered nonspecific foci of T2 FLAIR hyperintensity are noted in the periventricular and subcortical white matter, likely representing chronic small vessel ischemic change.



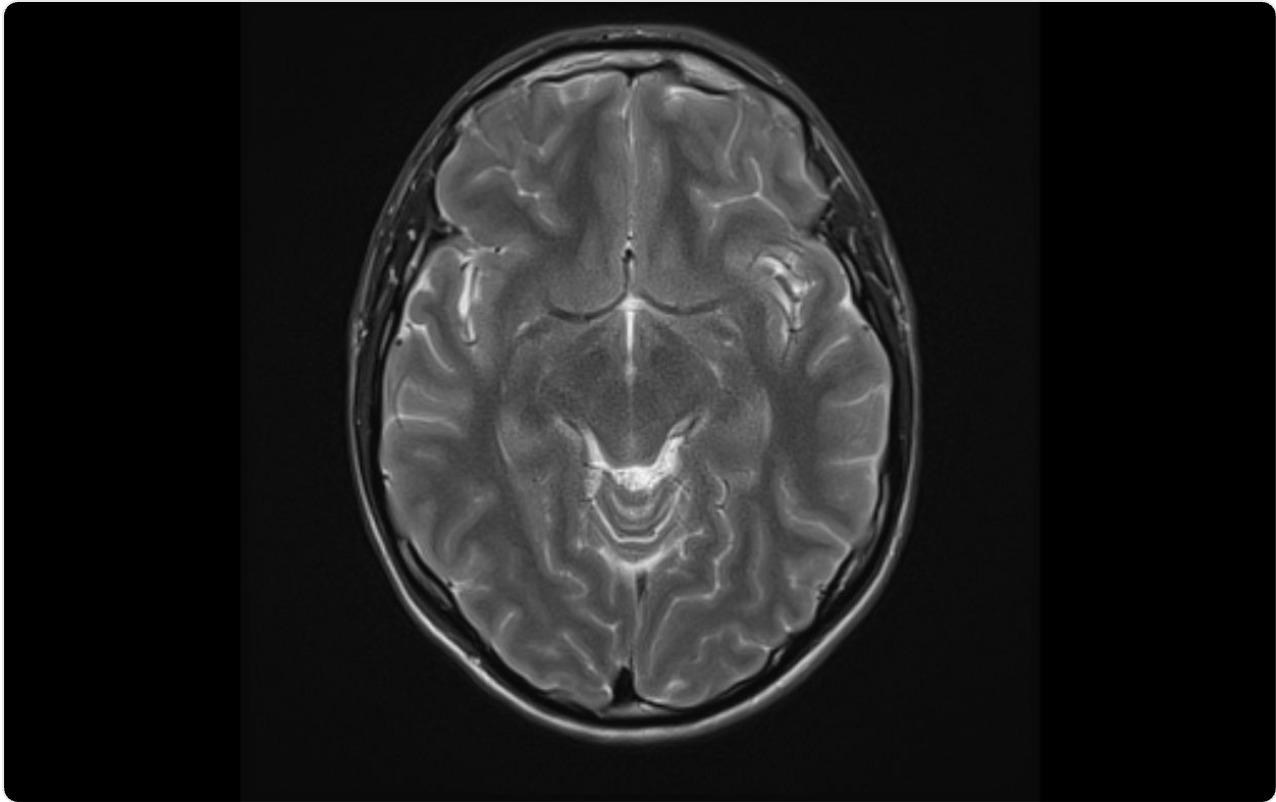
Ventricular System

No Adverse Findings

Ventricles are normal in size and configuration.

No midline shift.

Fourth ventricle is normal in size and position.



Posterior Fossa

Moderate Findings

No extra-axial fluid collections.

Normal flow void in the basilar artery.

Mild cerebellar tonsillar ectopia is present, measuring approximately 6 millimeters below the foramen magnum, consistent with Chiari I malformation.

No syrinx identified.



Extra-axial Spaces

No Adverse Findings

No extra-axial fluid collection, mass, or hemorrhage.

Sulci and cisterns are normal.



Skull/Calvarium

No Adverse Findings

Calvarium is intact with normal morphology.

No lytic or blastic lesions.



Eyes

No Adverse Findings

Globes are normal in size and signal intensity.

Optic nerves are symmetric.

No intraorbital masses.



Sinuses and Mastoids

Mild Findings

Mastoid air cells are well-aerated.

An incidental retention cyst is noted in the left maxillary sinus.

Summary



Technique

Scan protocols:

1.5T Scanner; Sag T1-weighted; Ax/Cor T2-weighted; Ax/Cor FLAIR; Ax DWI with ADC map; Ax GRE



Discussion

Scope of study:

MRI is more sensitive than CT for most intracranial pathology; however, small lesions may be below the resolution of this study, and clinical correlation is recommended.



Comparison

Previous studies used during interpretation:

None available.



Impressions

Key findings of the report:

Scattered nonspecific foci of T2 FLAIR hyperintensity in the periventricular and subcortical white matter, likely representing chronic small vessel ischemic change.

Mild cerebellar tonsillar ectopia measuring approximately 6 millimeters below the foramen magnum, consistent with Chiari I malformation.

Incidental retention cyst in the left maxillary sinus.



Next Appointments

Recommended follow-up steps:

Recommend neurosurgical consultation for evaluation of Chiari I malformation.

Radiologist:

Richie Bailey

Signature:

Date Signed:

January 14, 2026 at 10:51 AM