



2025

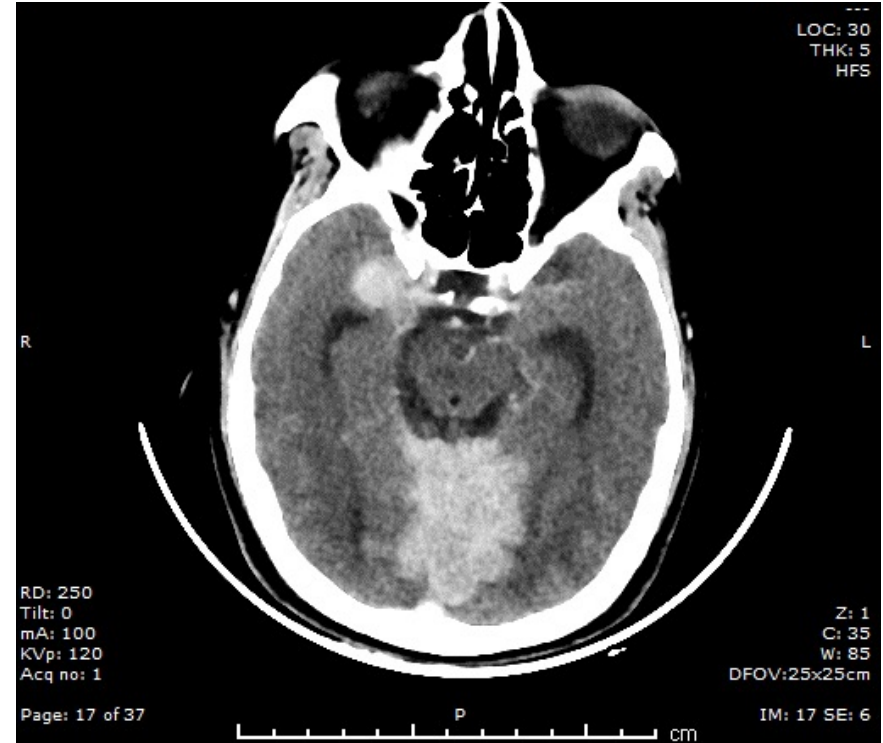
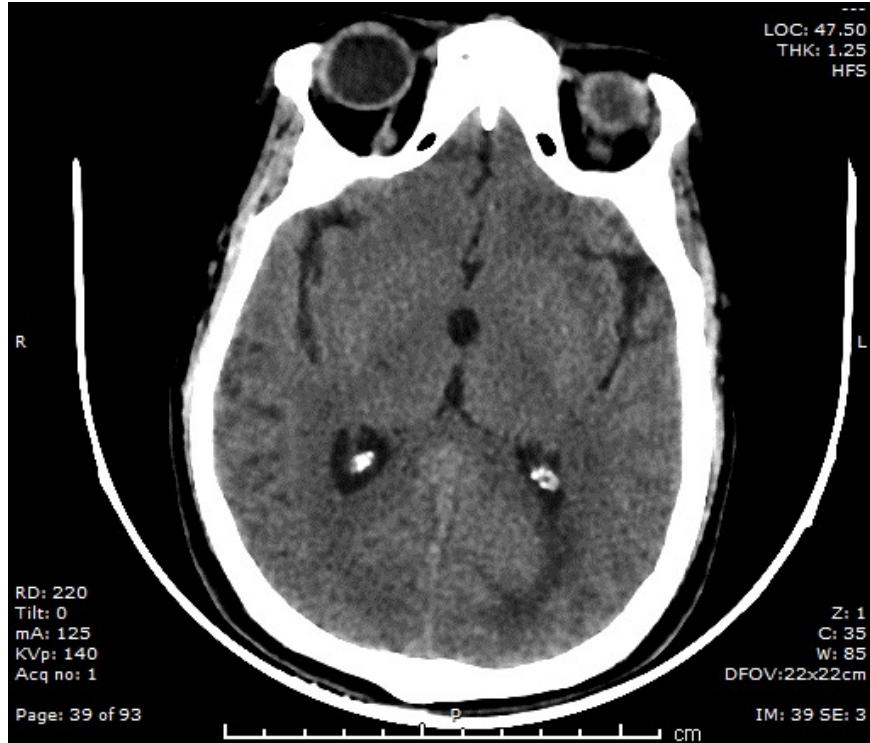
**KARNATAKA RADIOLOGY EDUCATION PROGRAM**

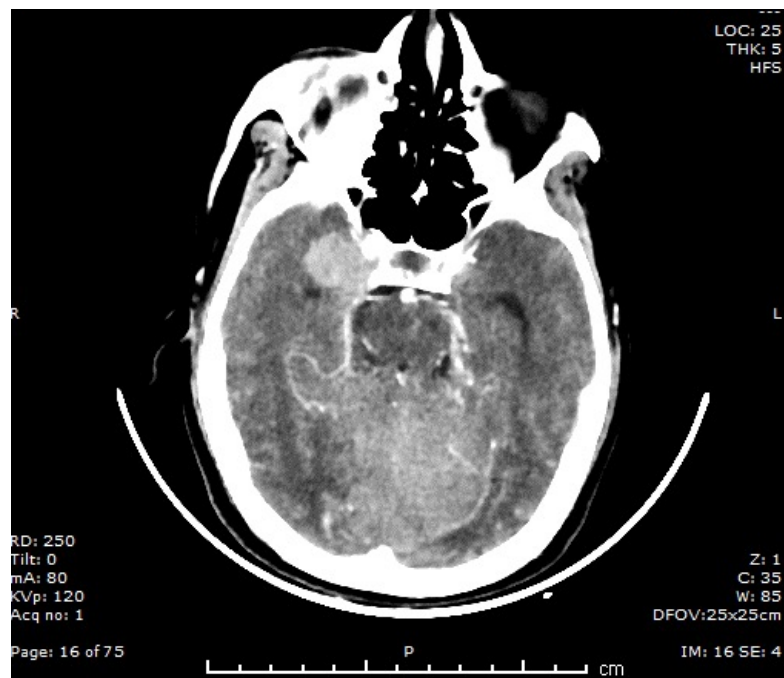
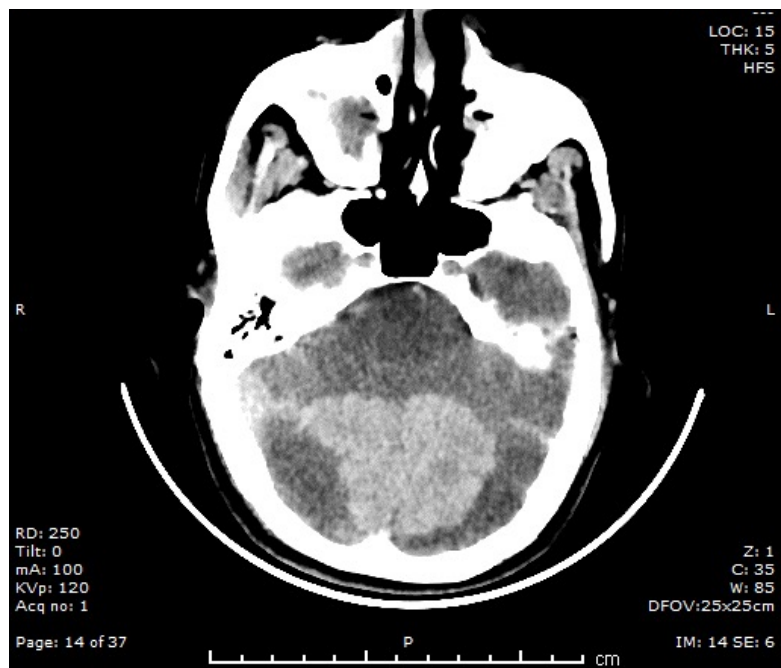
# CHIEF COMPLAINTS

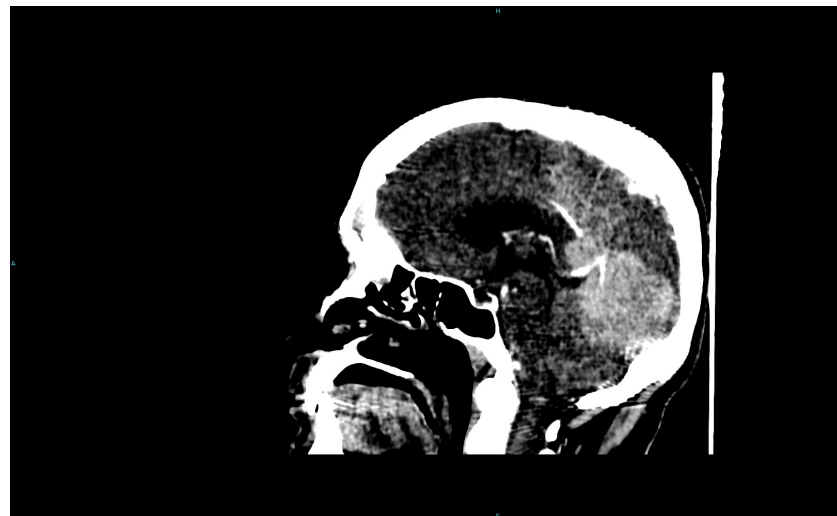
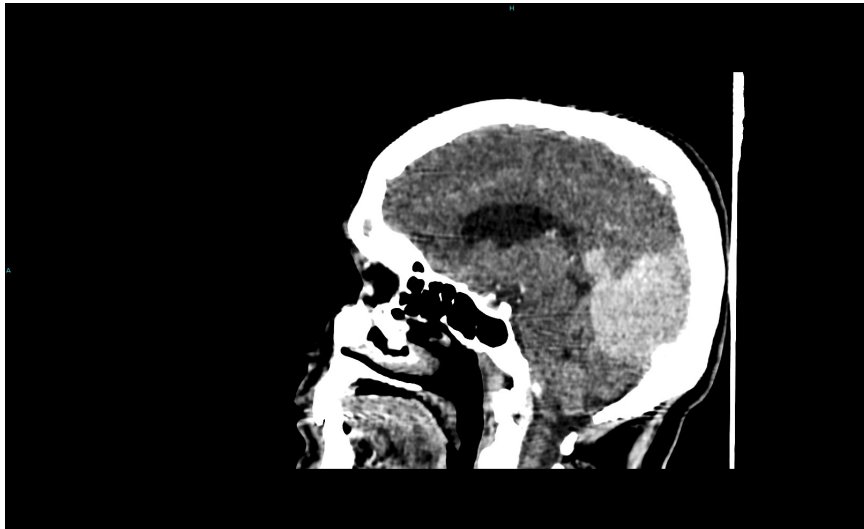
- Name; ABC
- Age; 50yrs
- Patient came with complaints of headache since 2 days with altered sensorium
- Patient is known case of pulmonary tuberculosis is on ATT

General physical examination- within normal limits

# CT



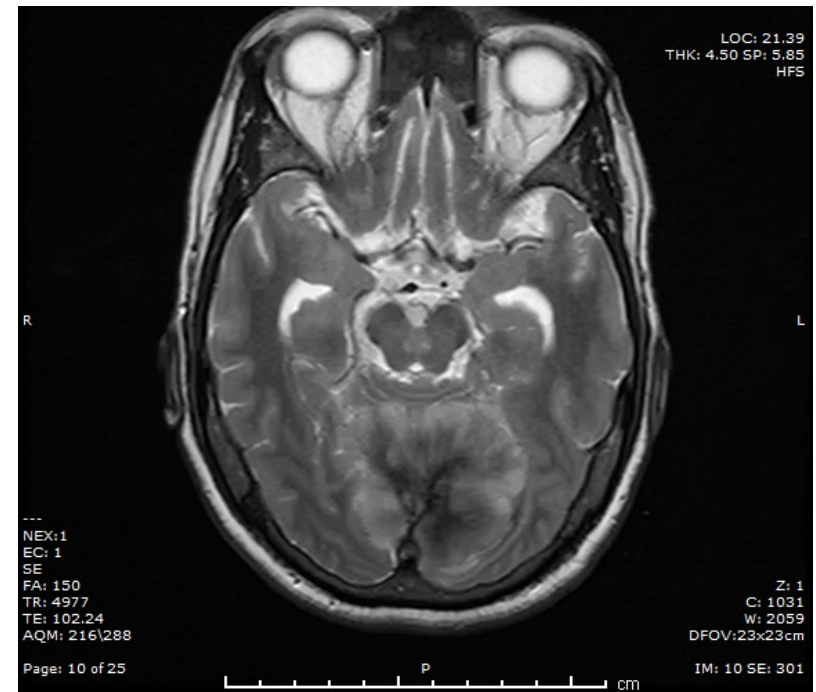
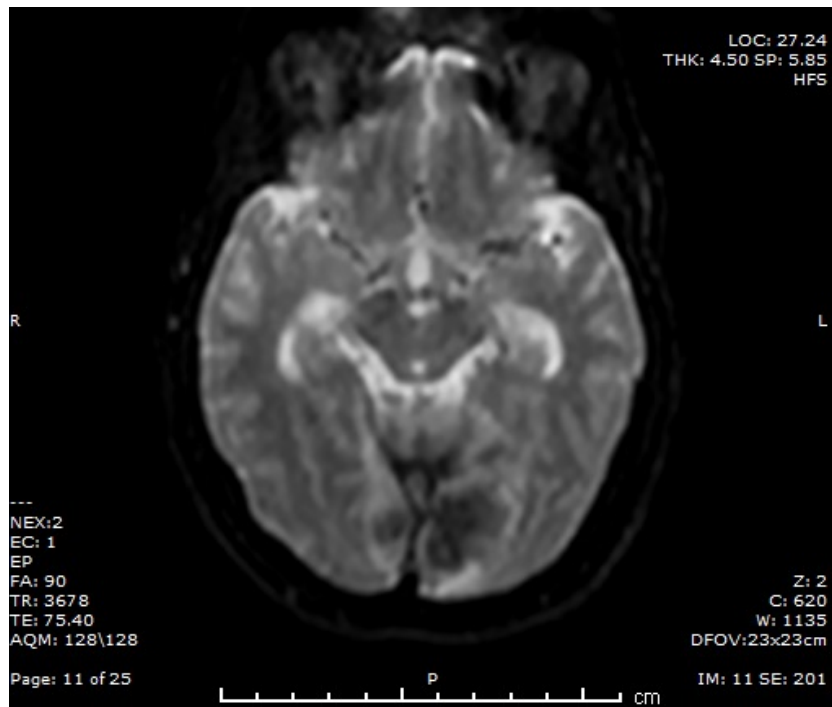


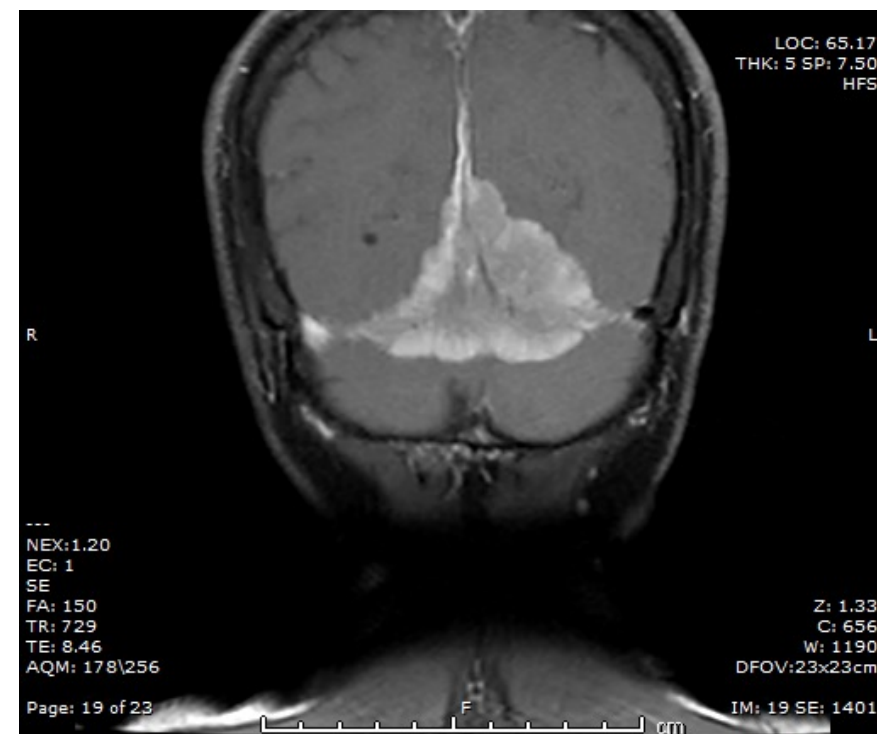
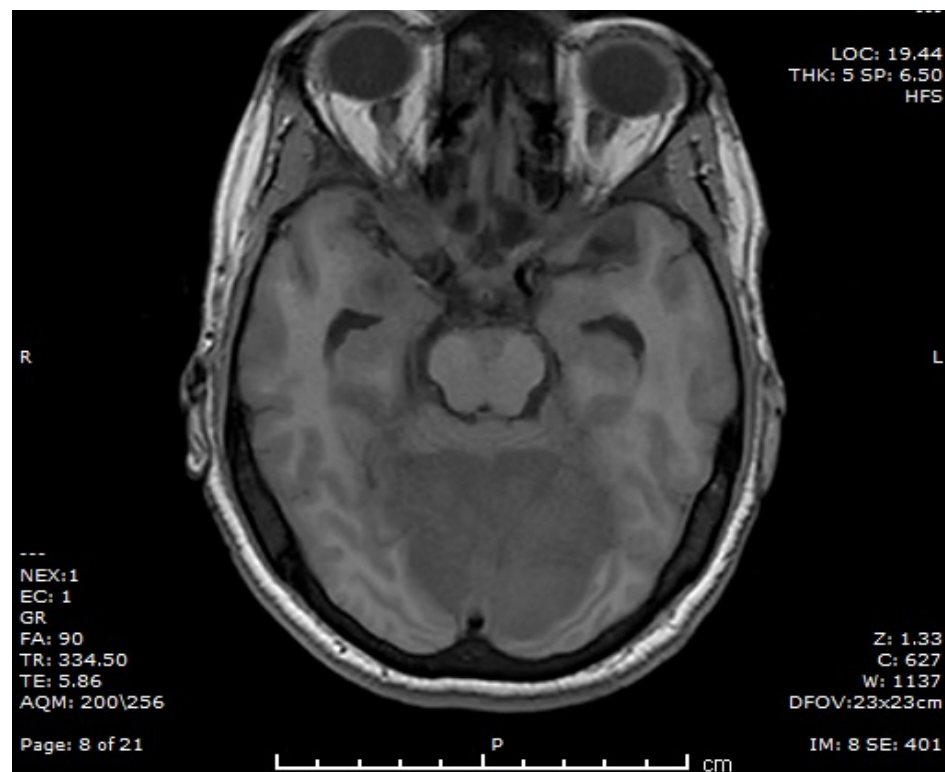


# CT FINDINGS

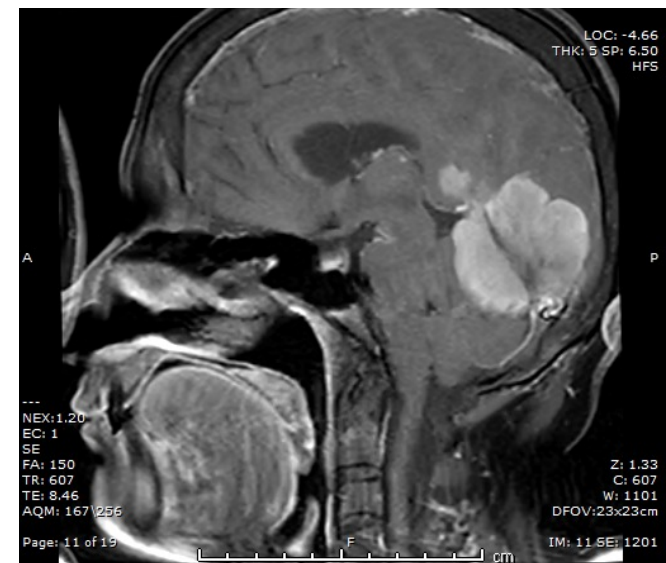
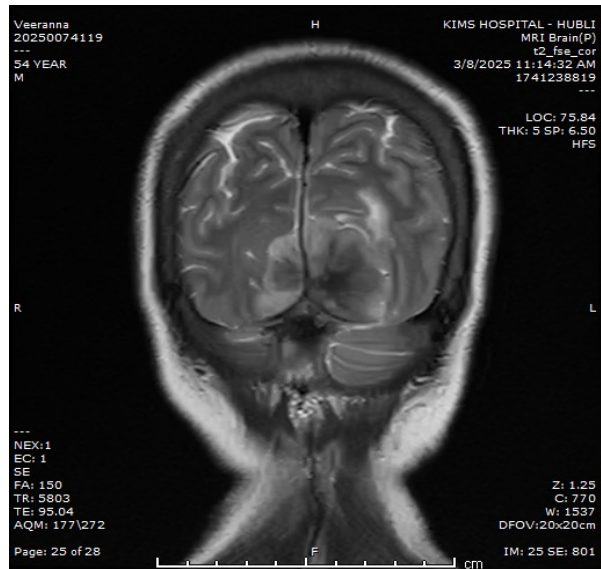
- An ill defined extraaxial isodense Lesion noted along the tentorium extending to falx. It measures 5x4.5x5cm. Post contrast study shows homogeneous enhancement. The lesion is involving supra and infratentorial location . The lesion is extending along the dura with enhancing thickening of right tentorium, extending to right temporal convexity with a similar lesion measuring 2.5x2cm. Similar lesion also noted in the pericallosal region measuring ~ 1.5x1.7cm in the posterior aspect.
- Expansion of diploic space with diffuse thickening of skull and facial bones.

# MRI









# MRI FINDINGS

- Enhancing lesion T2/FLAIR heterointense, T1 hypointense ,non diffusion restriction measuring 5x4.5x4.9 cm noted along tentorium extending to falx. The lesion is involving infra and supratentorial location. The lesion is extending along dura with enhancing thickening of right tentorium,extending to right temporal convexity with a similar lesion measuring 2.5x2 cm in right temporal convexity and extending along inter hemispheric fissure to involve superior pericallosal region with lesion measuring 1.7x1.4cm noted. The lesion shows reduced NAA peak and elevated choline peak

# Differential diagnosis to be considered-

1. Meningioma
2. Metastasis

# MENTORS

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Thank you