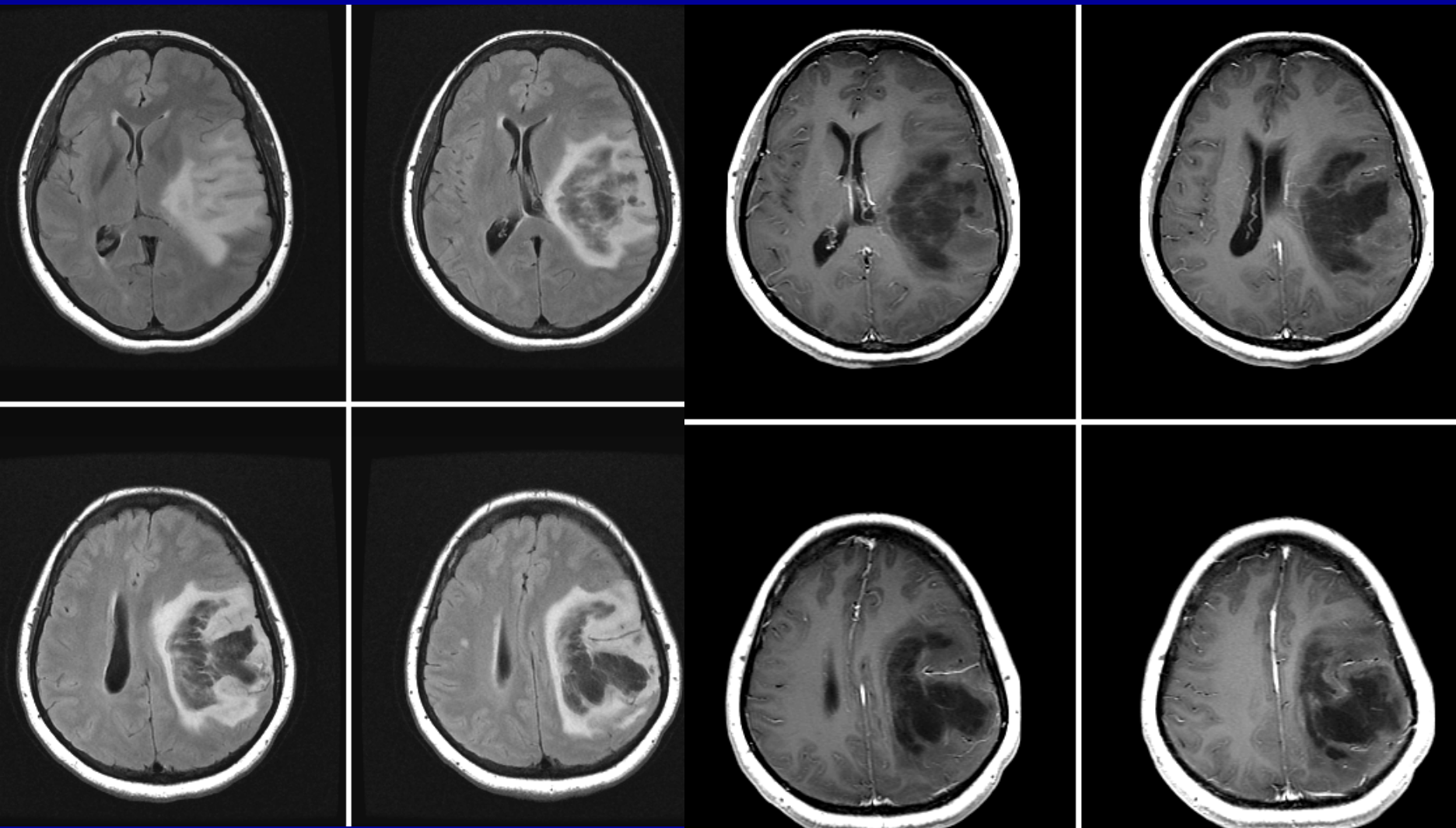


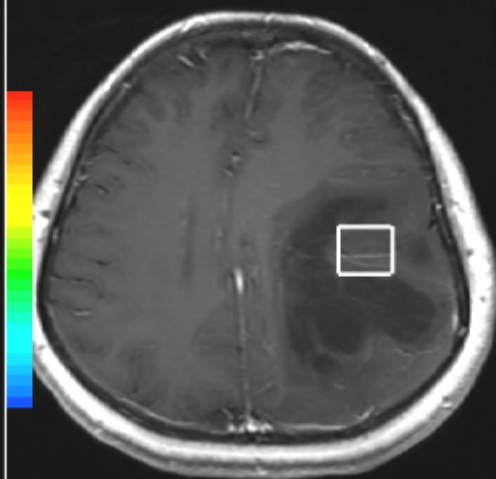
Ask the Expert????
(not so much)

David M Yousem MD MBA
Johns Hopkins Medical Institution

A young female presented with seizure and right sided weakness

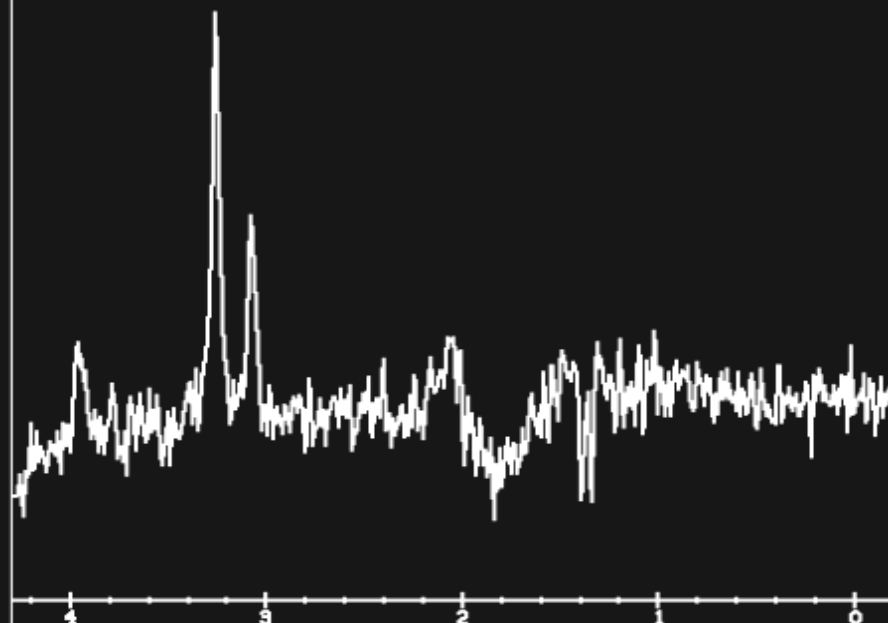


Localizer



MRI Report:SVQ

CSI Exam No: 2987
CSI Series No: 12
CSI Image No: 1+C
CSI Slice Pos: S46.9
CSI Resolution: 0.0000 cc
Reference Exam No: 2987
Reference Series No: 9
Reference Image No: 15+C



10 June 2008

AS

Ex: 2987

Se: 8

In: 15+C

R 60.1mm

A 115.1mm

S 37.0mm

no value



Axis 1

20

10

L
1
1
5

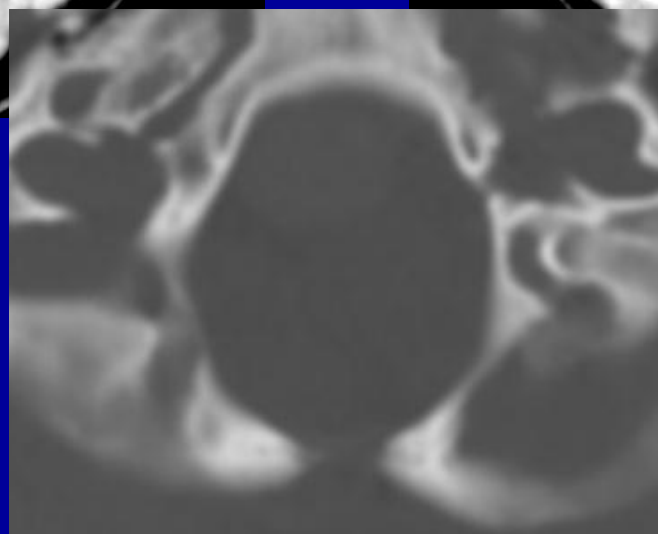
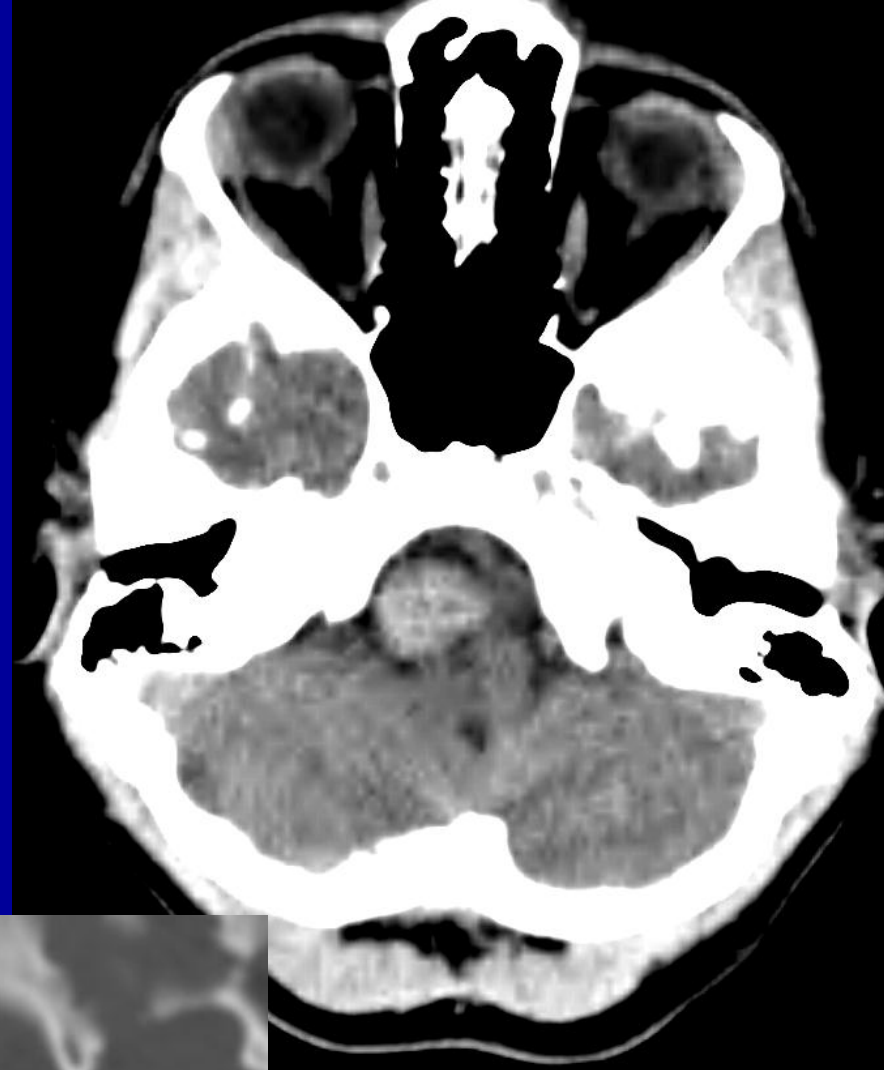
ROI	Avg.	Dev.
1	33.688	15.300
2	268.25	112.67

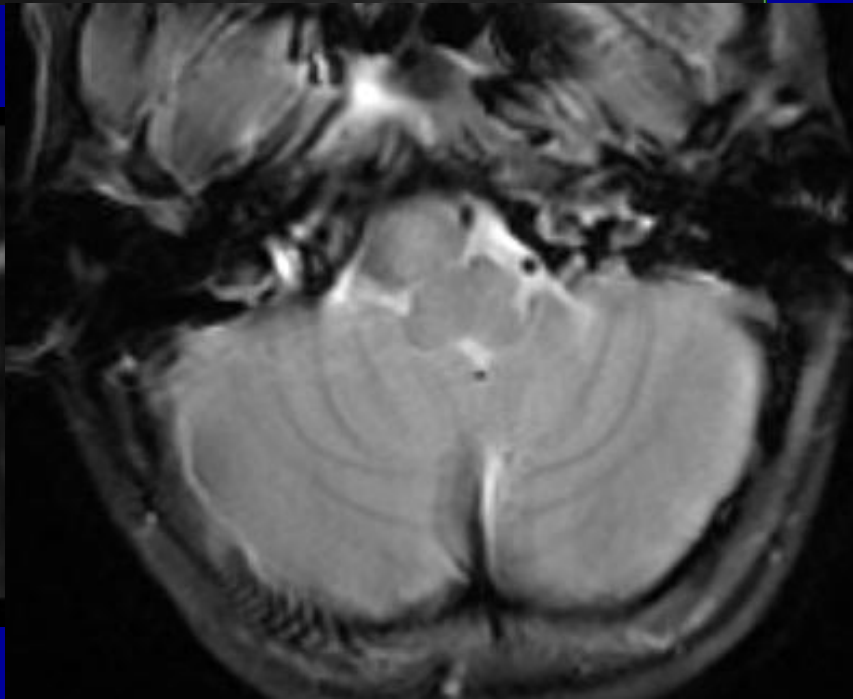
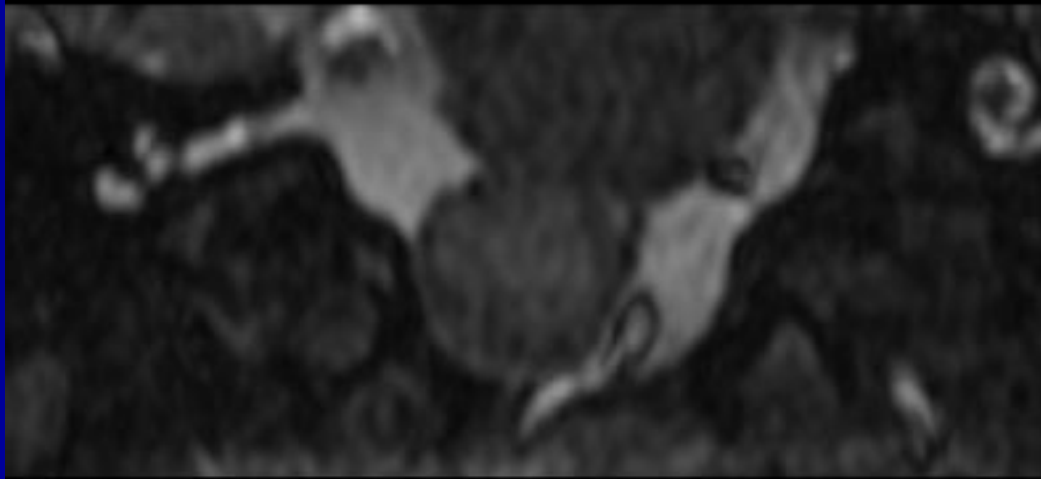
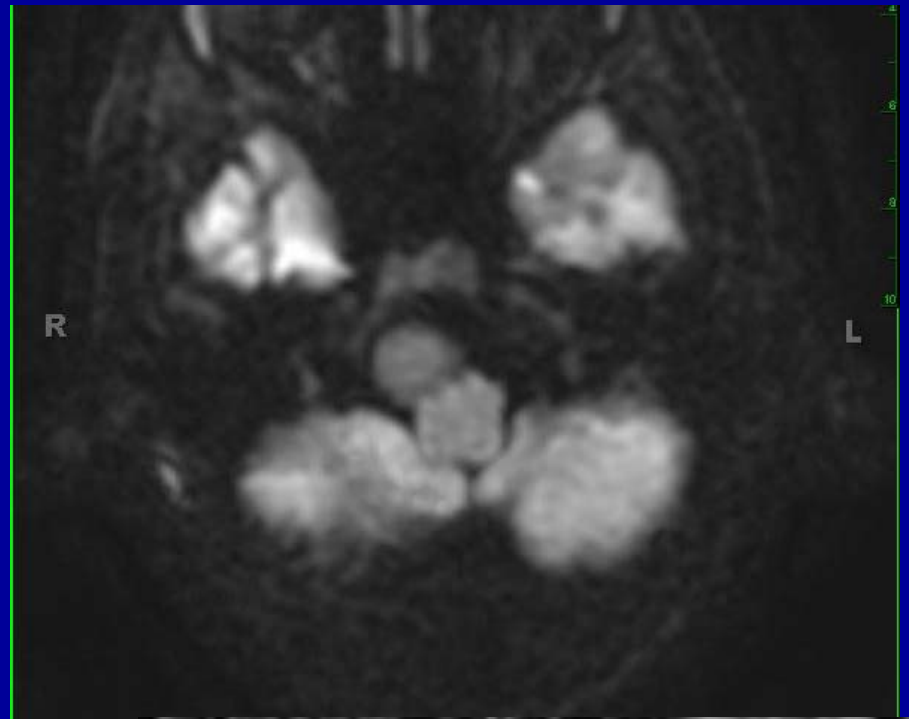
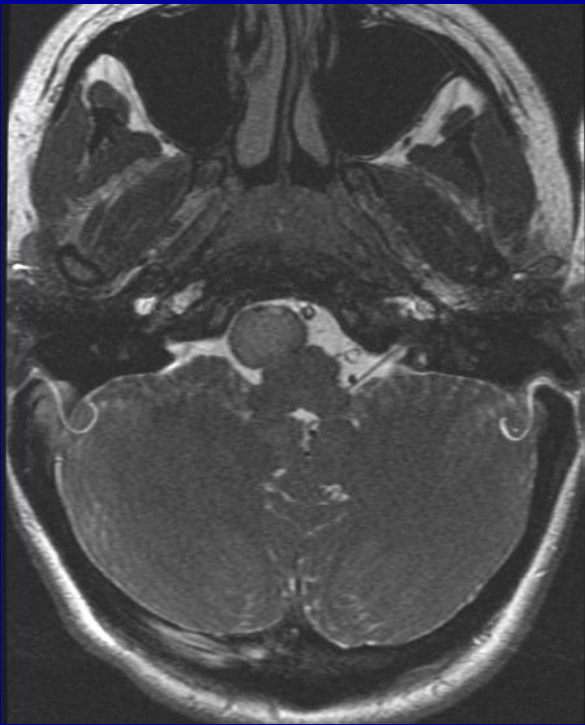
PI

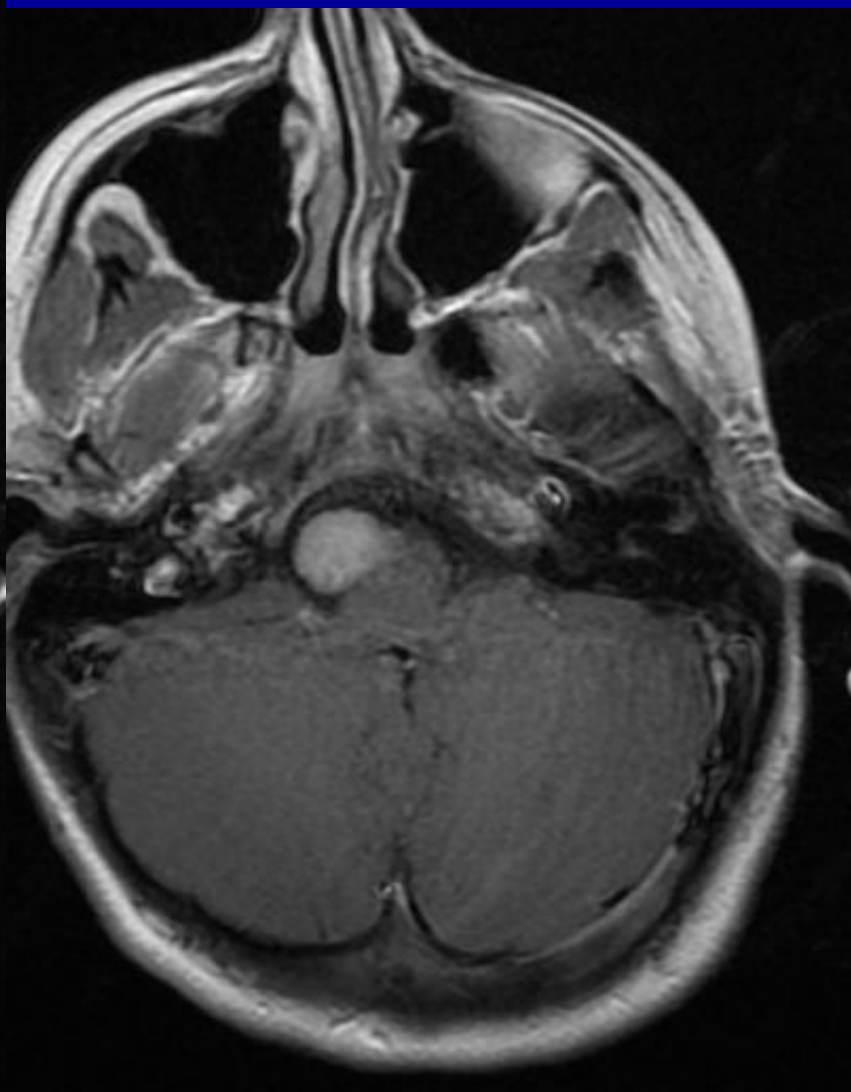
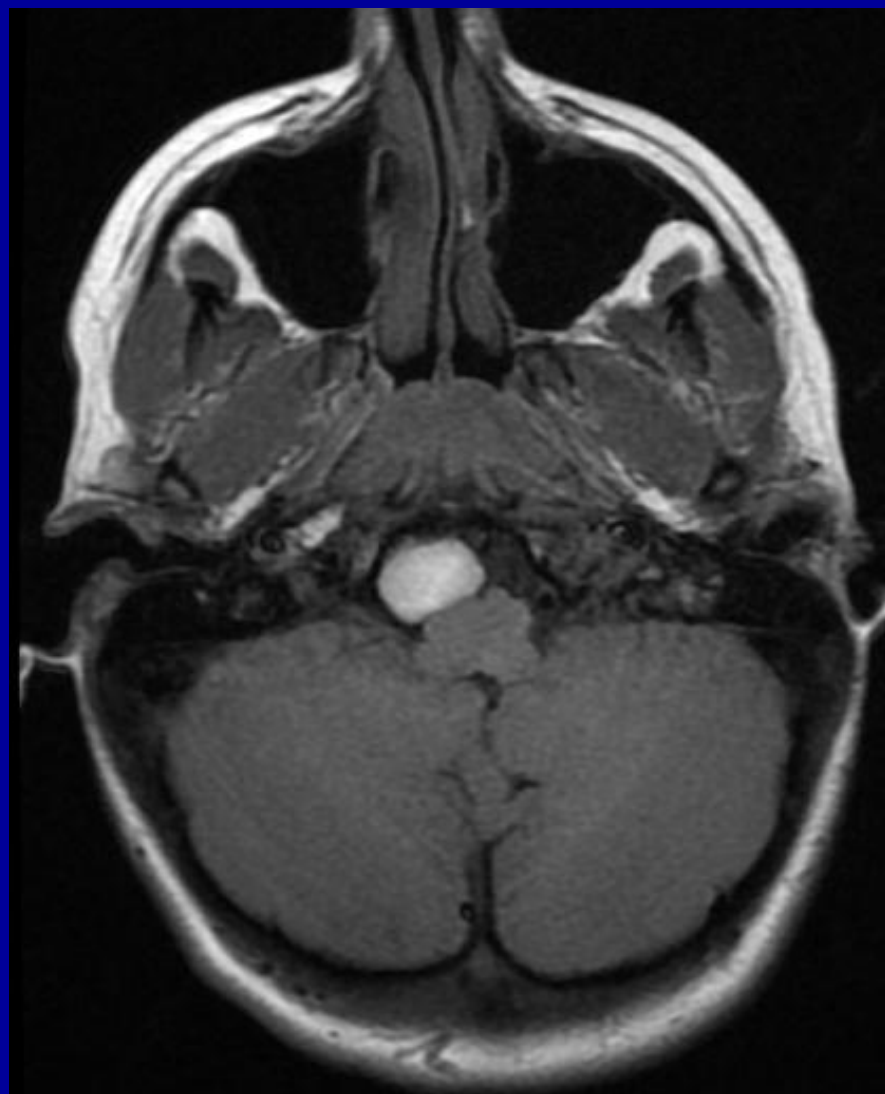
W = 671 L = 406

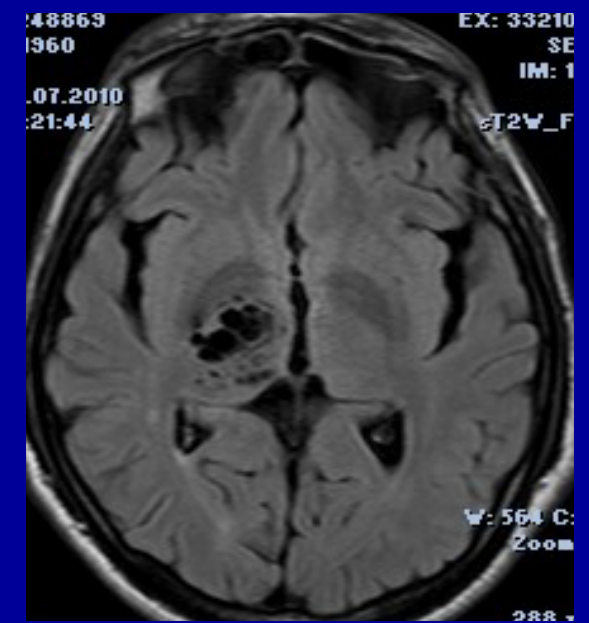
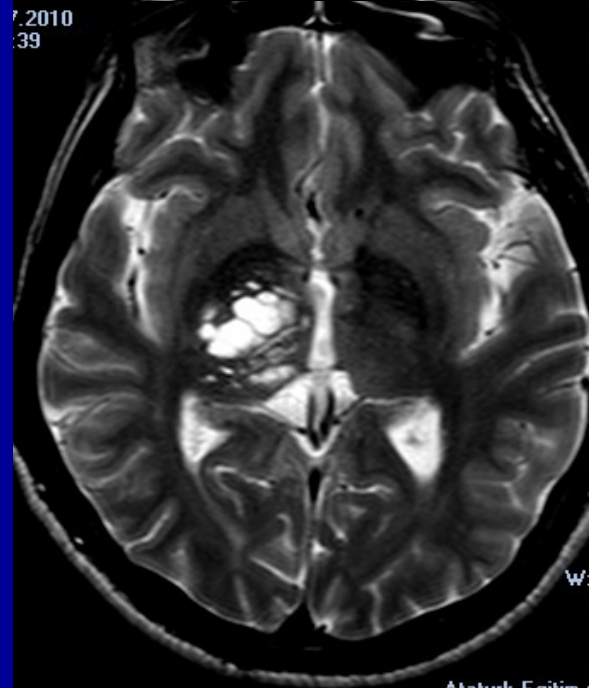
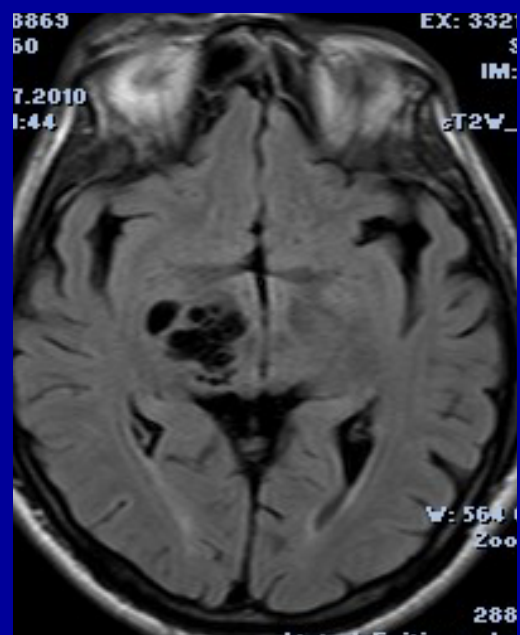
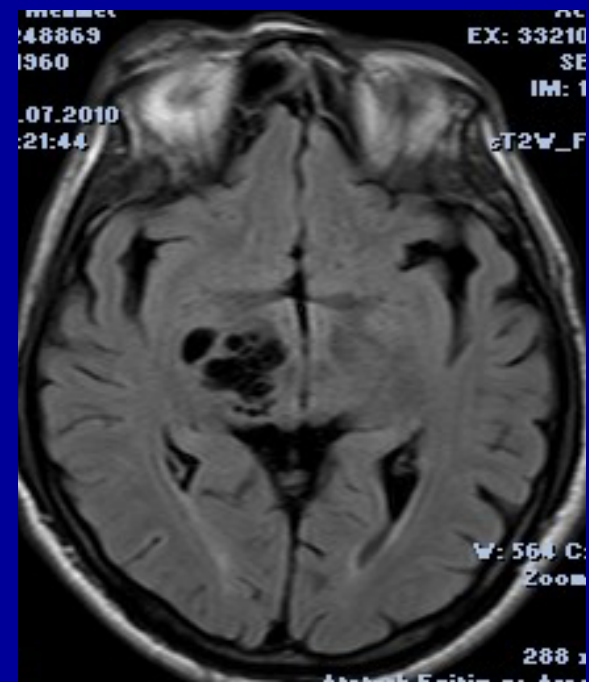
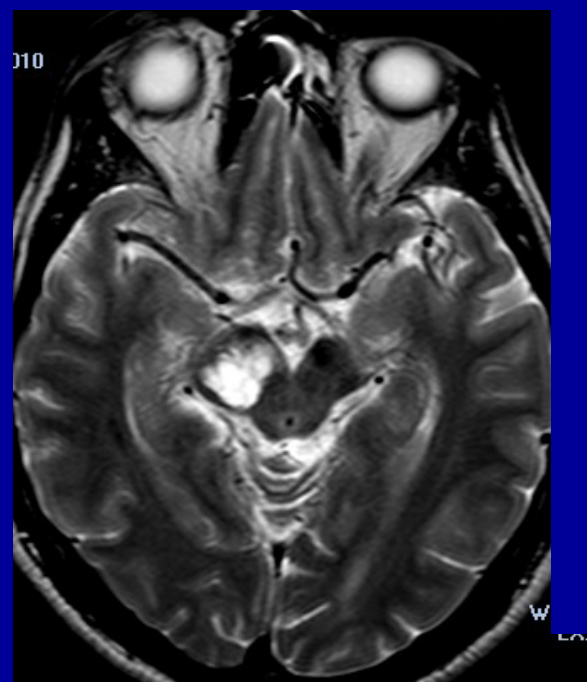
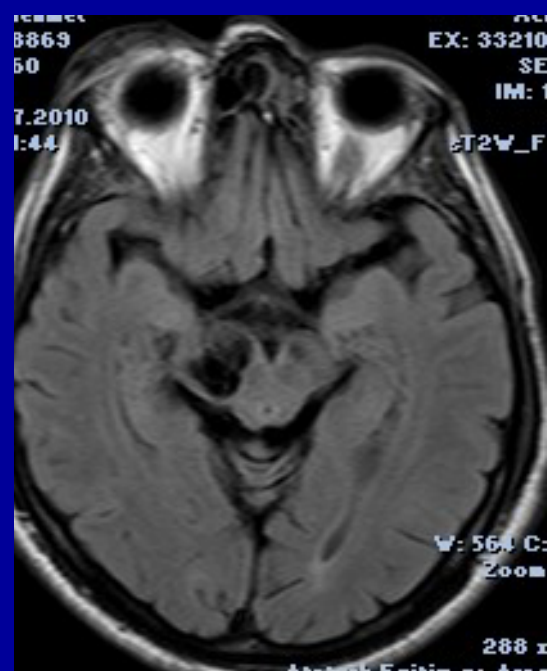
Teenager Hit in Head with Soccer Ball

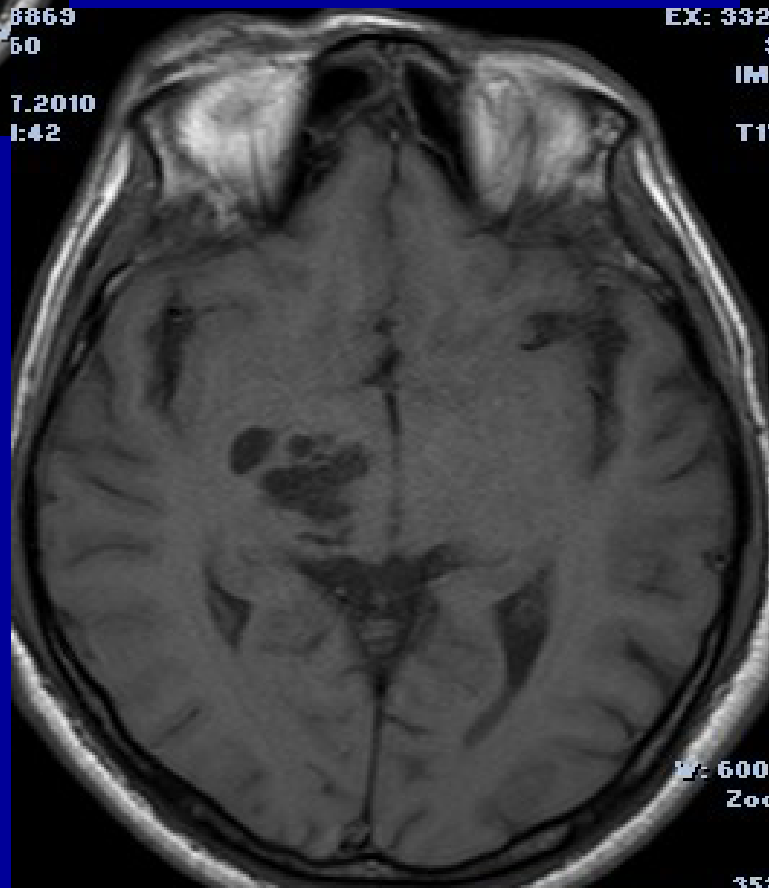
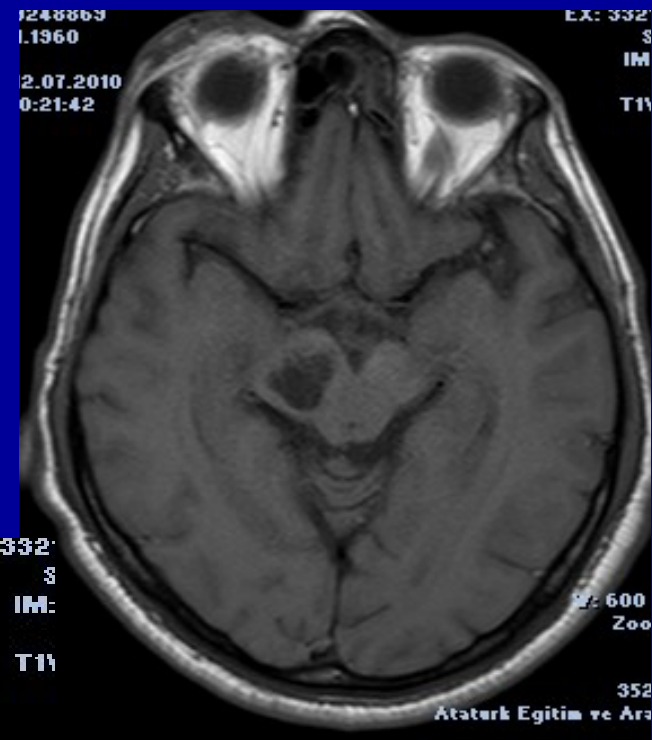
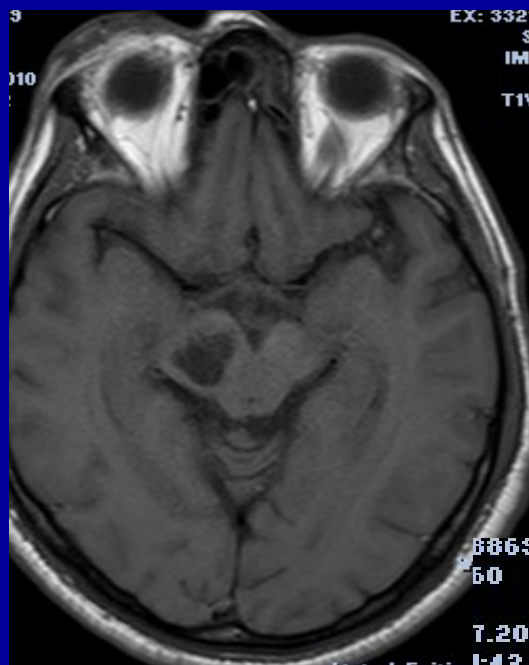
- CT in ED
- MRI two days later
- Headaches resolved
- Disposition re: playing Soccer?

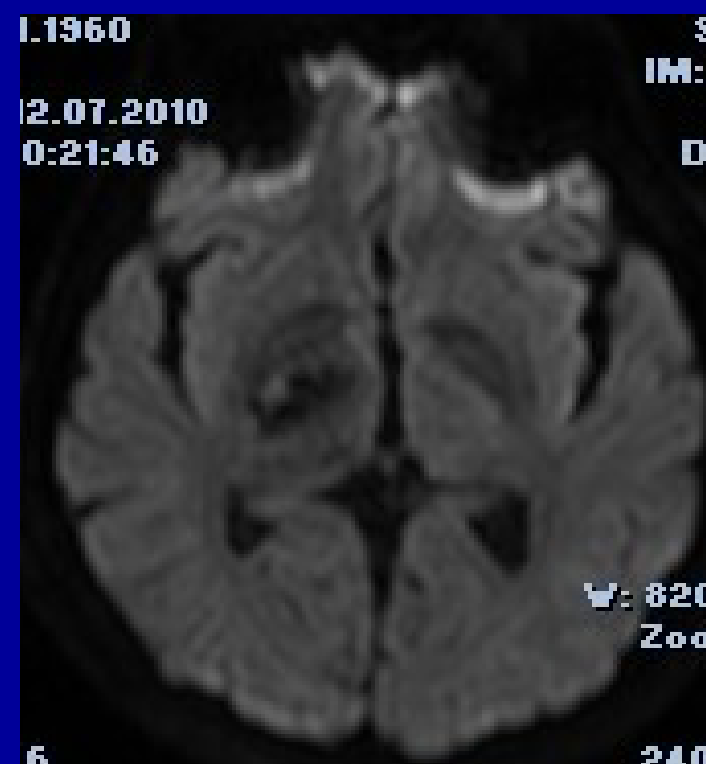
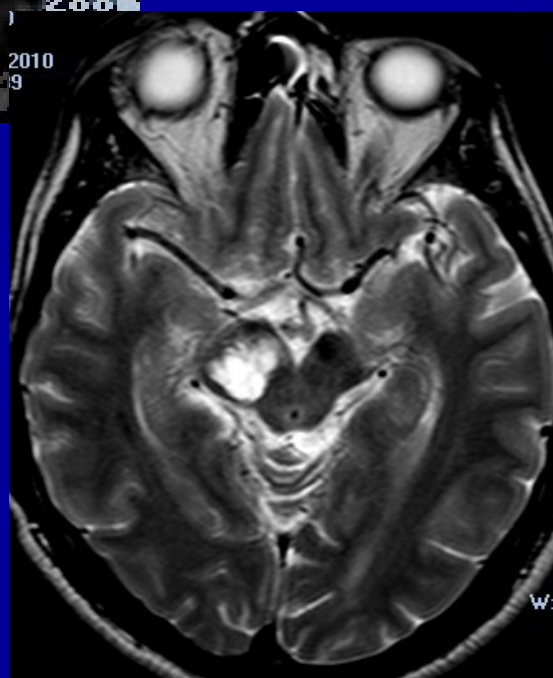
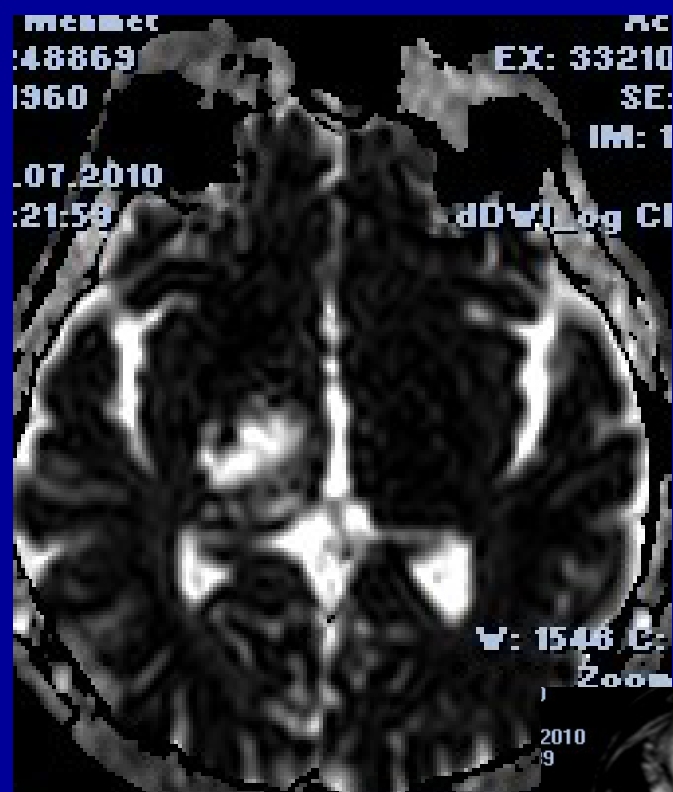


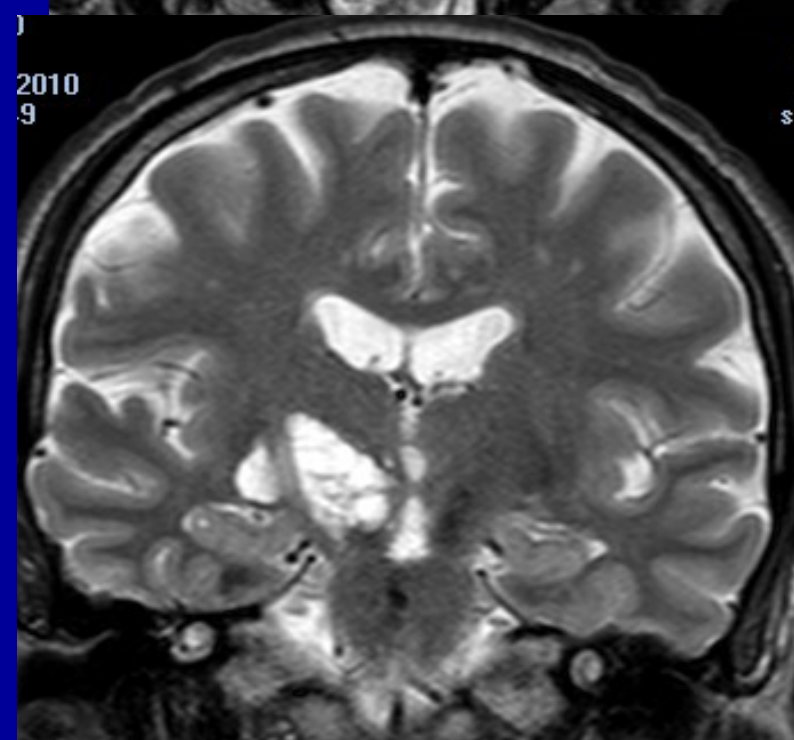
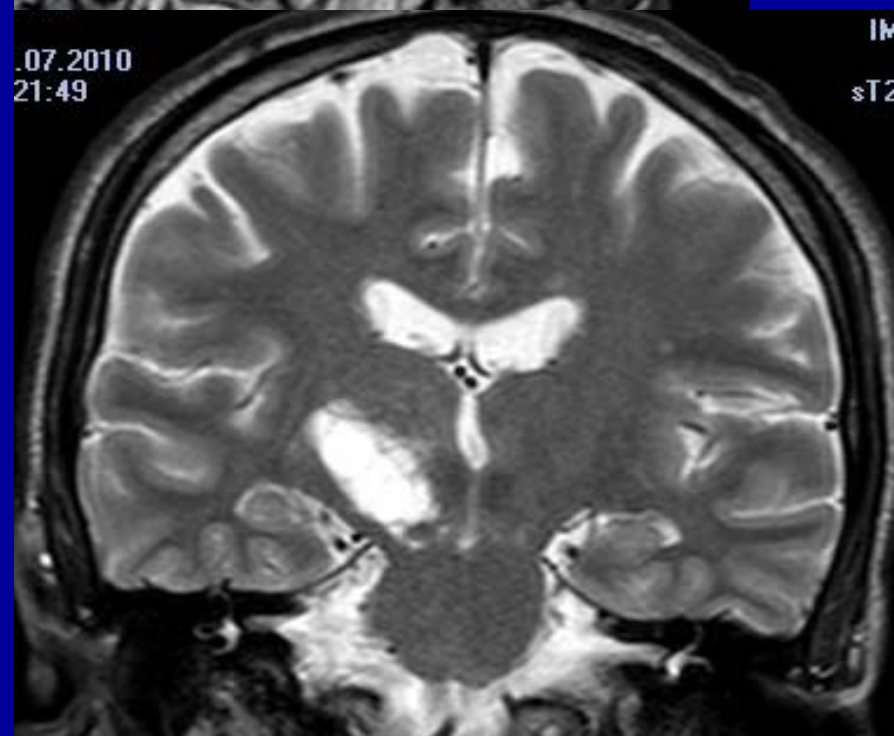
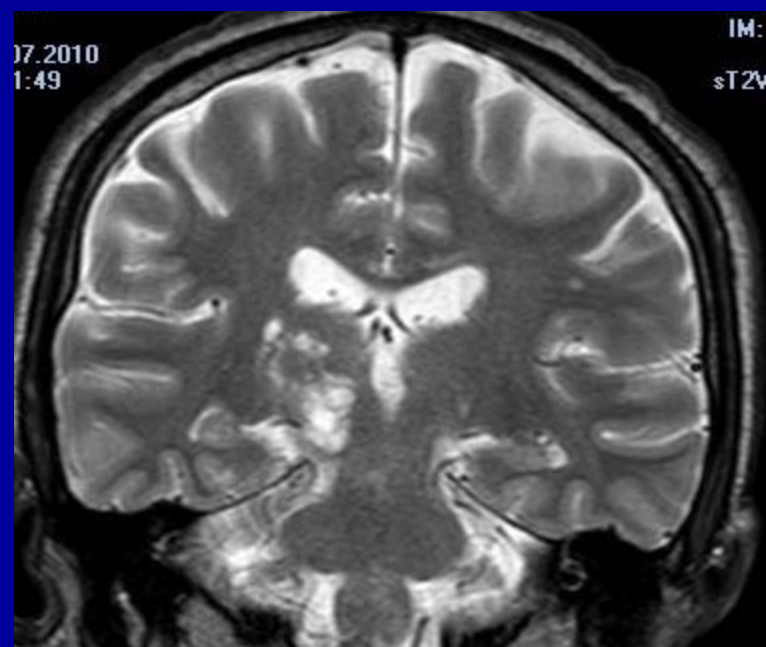
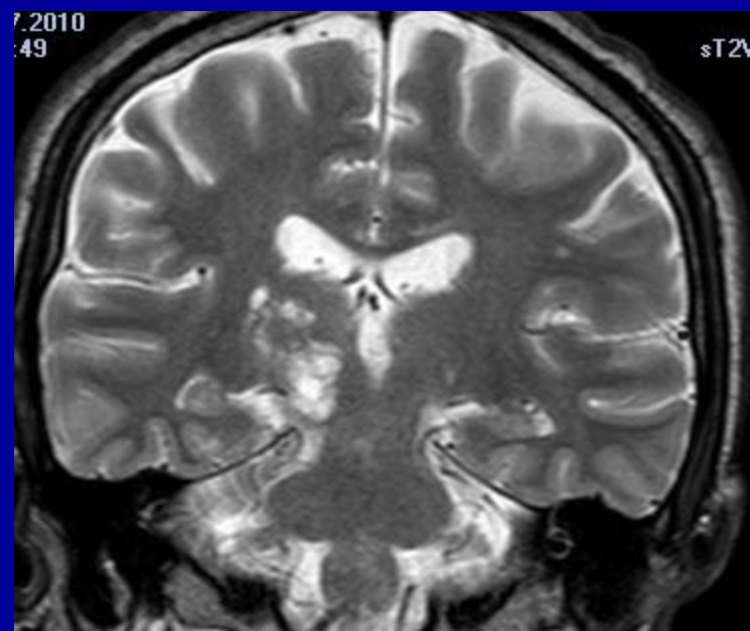


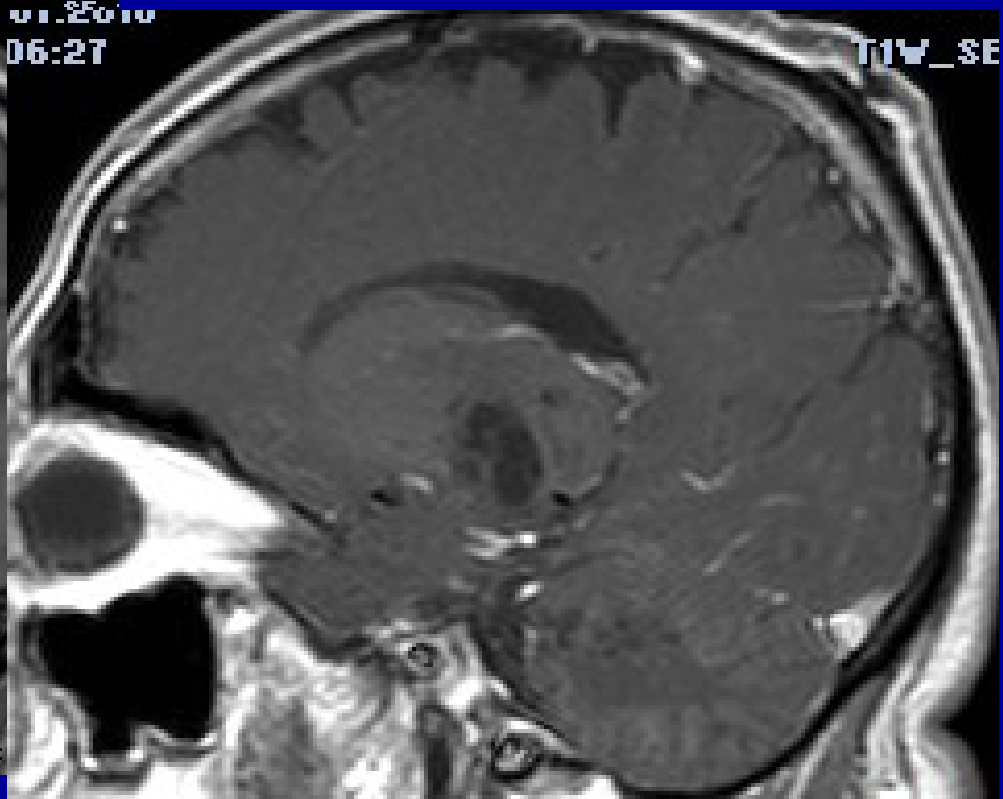
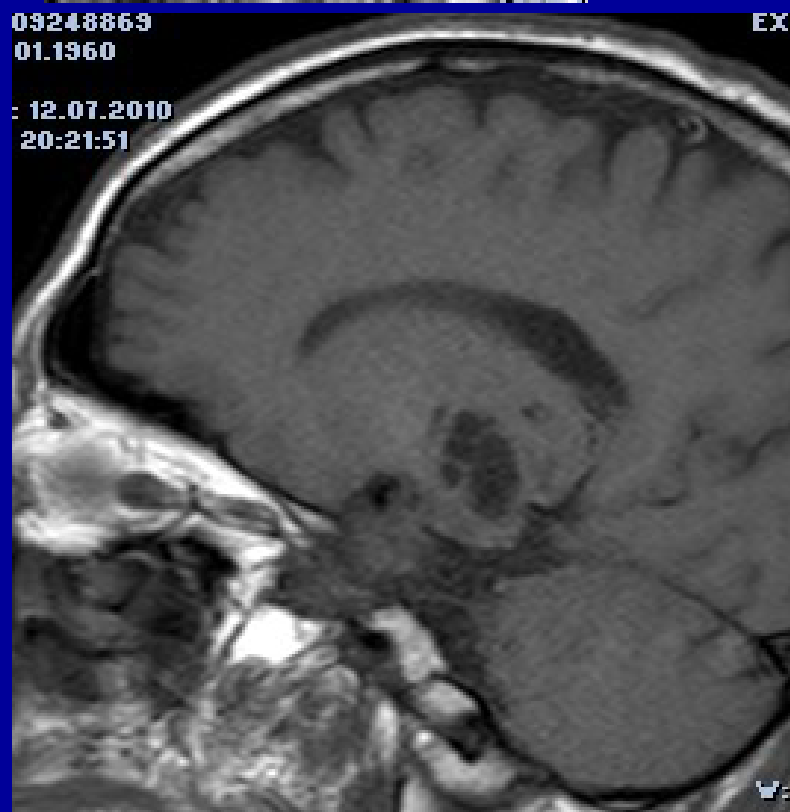
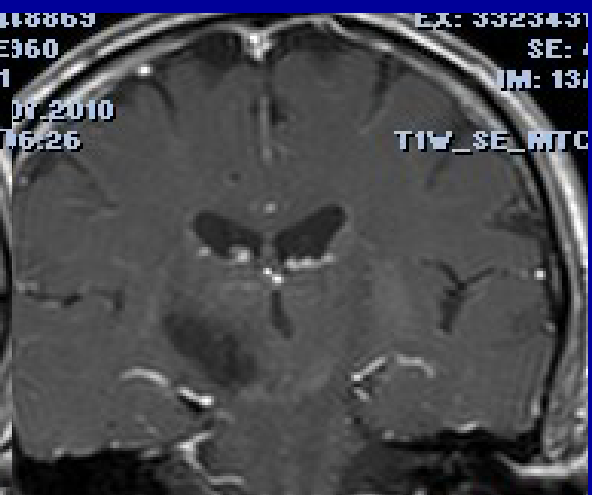
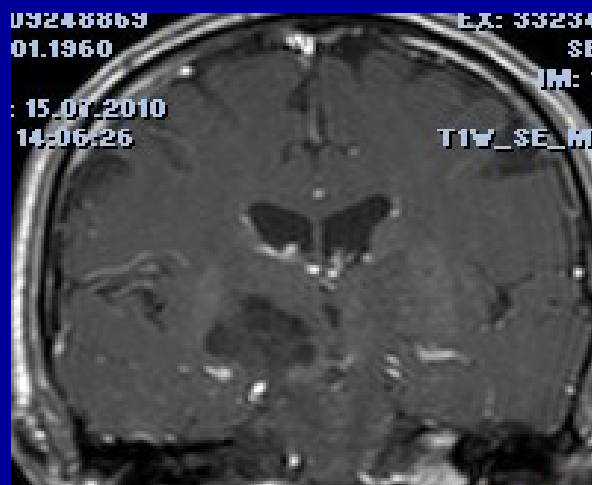
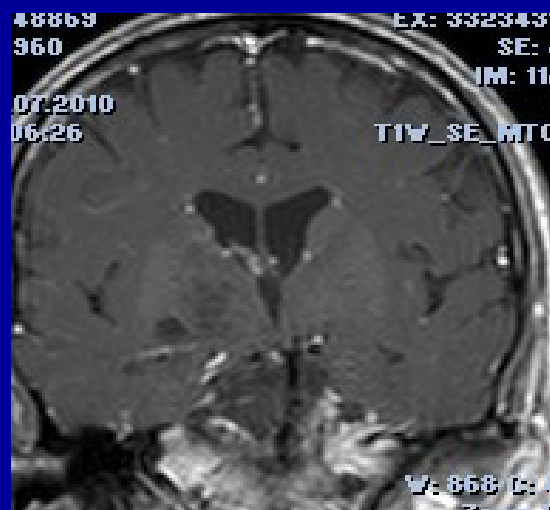












Case 1

44 y/o female with LBP radiating to the right



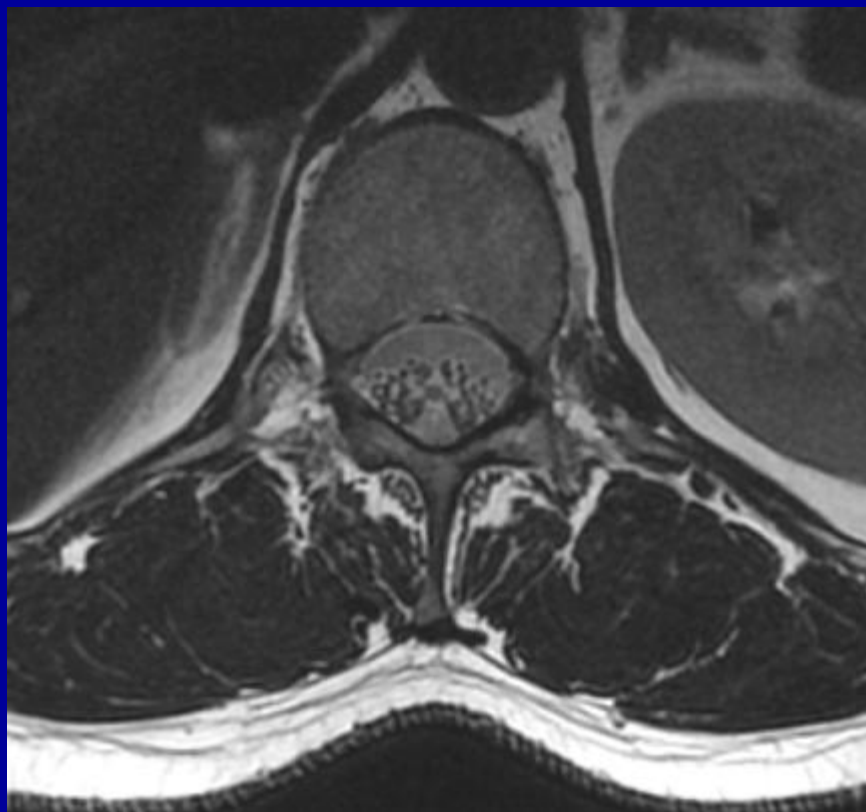
T2



T1

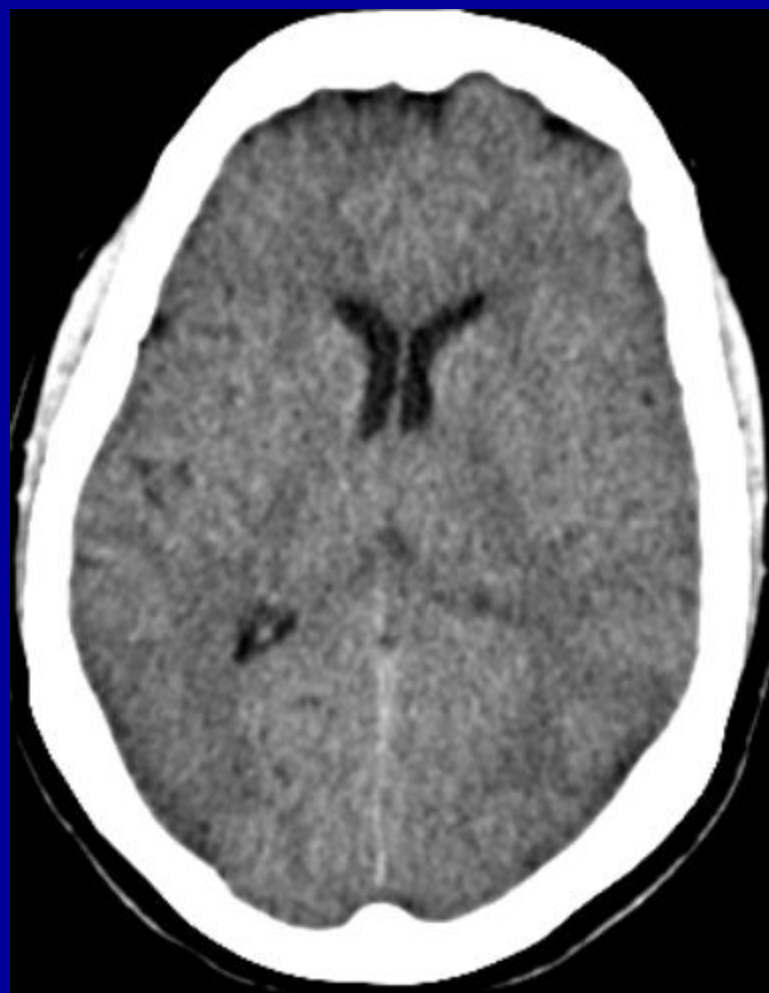


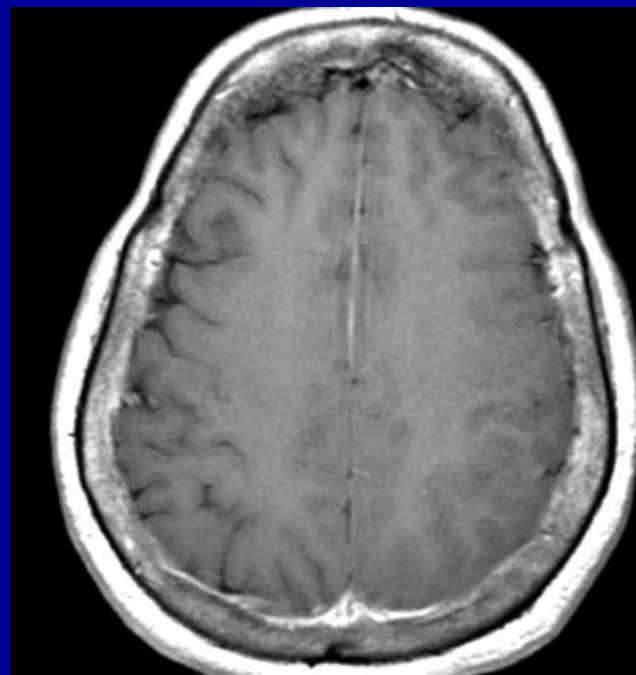
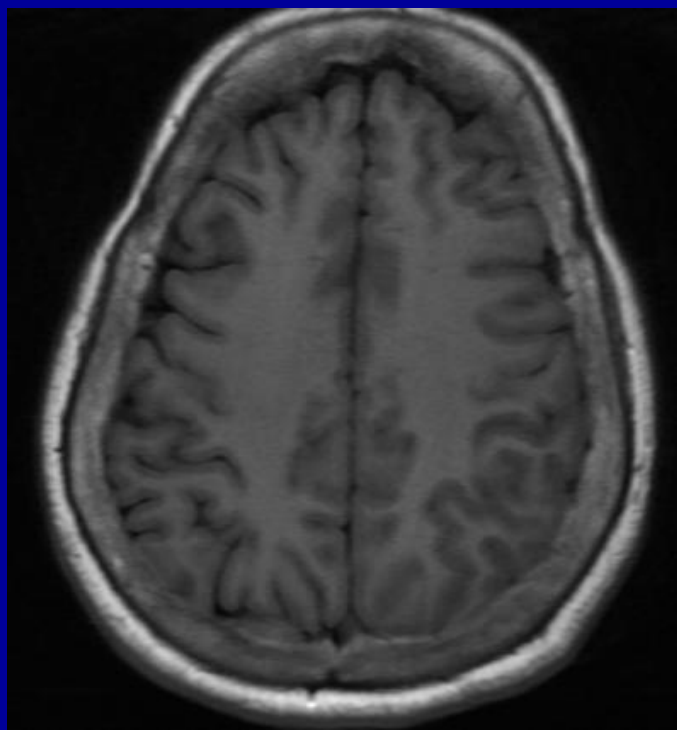
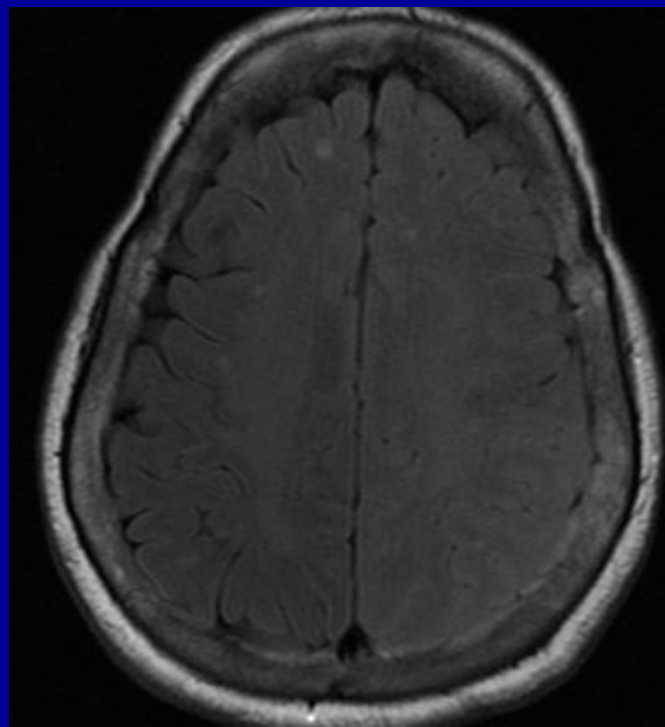
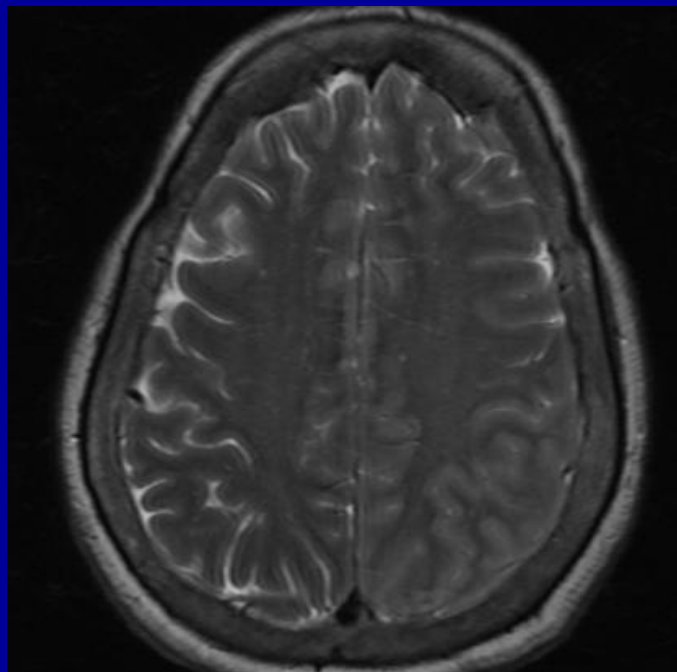
T1+FS+GD

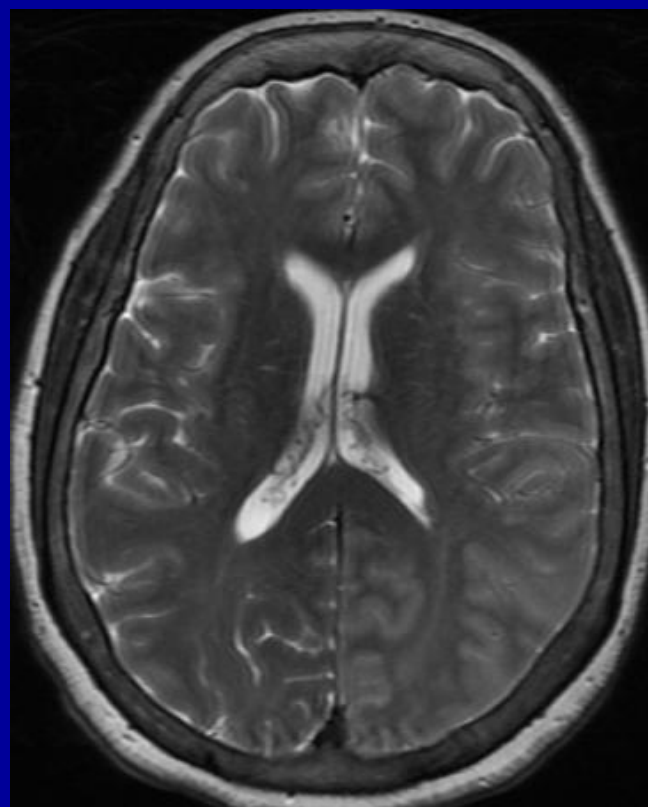
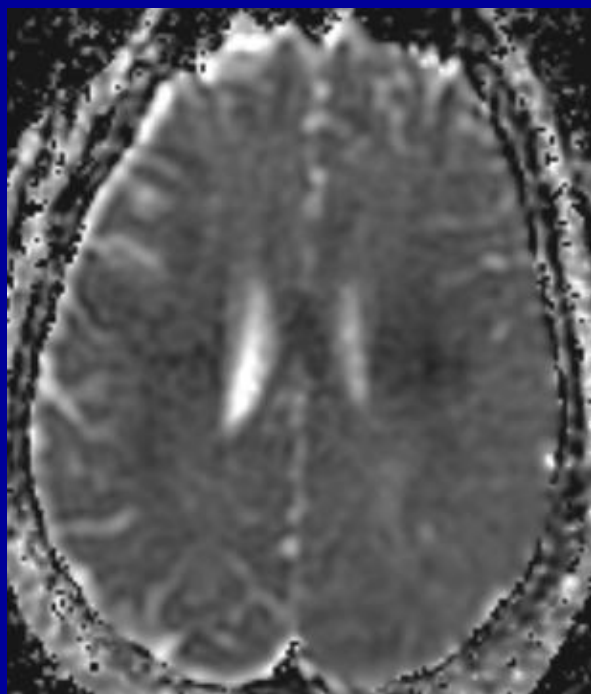
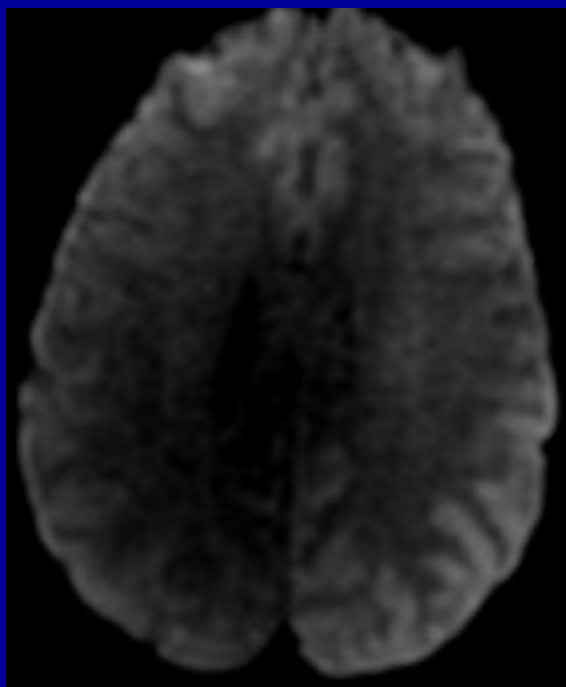


- 62 y/o female, admitted due to acute change in mental status, fever and difficulty speaking (thought to be sensory dysphasia in ED). No motor deficit
- History of epilepsy since childhood, no evidence for seizures on admission.
- During hospitalization the patient had a few seizures.

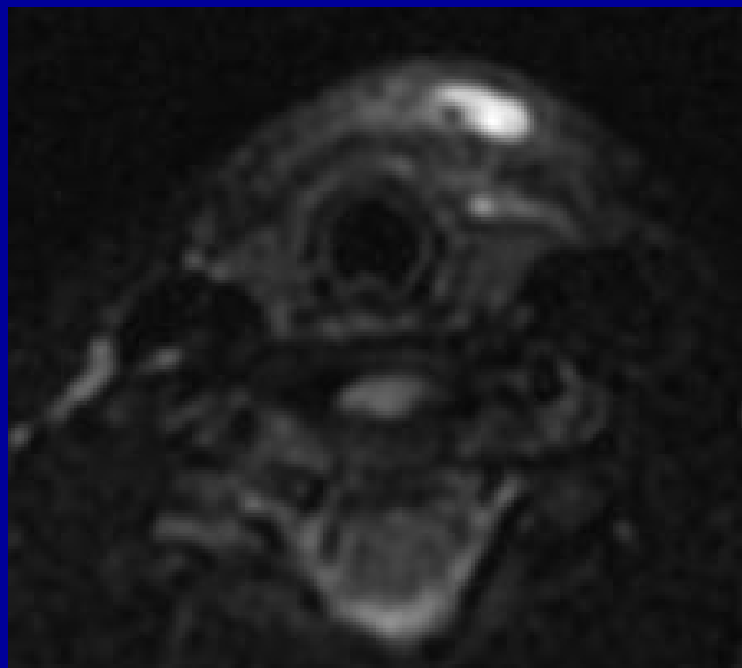
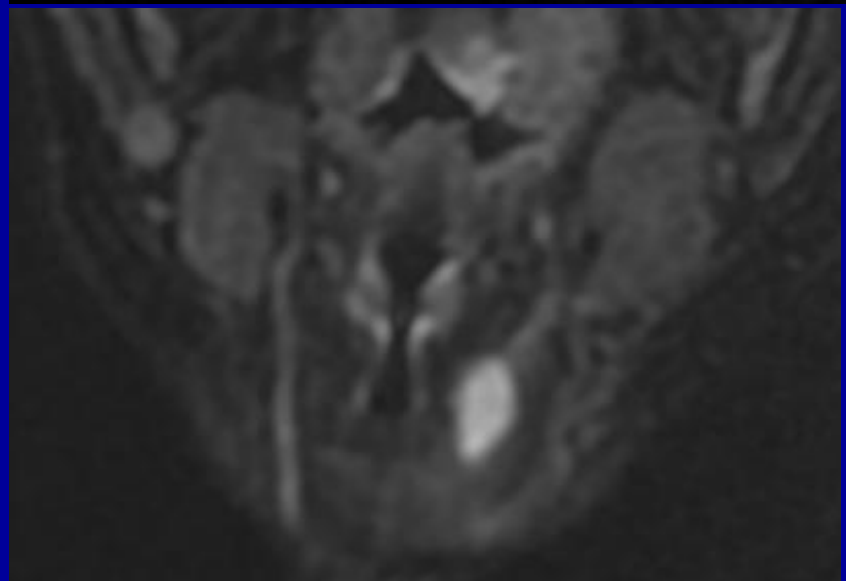
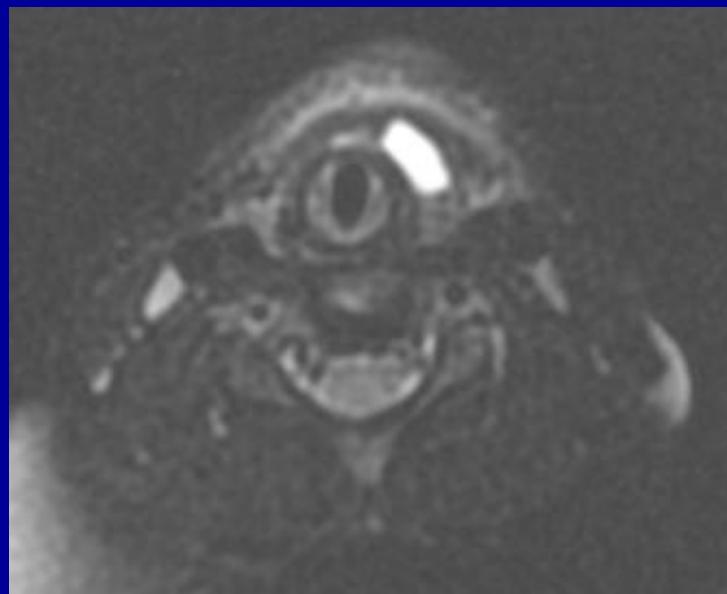
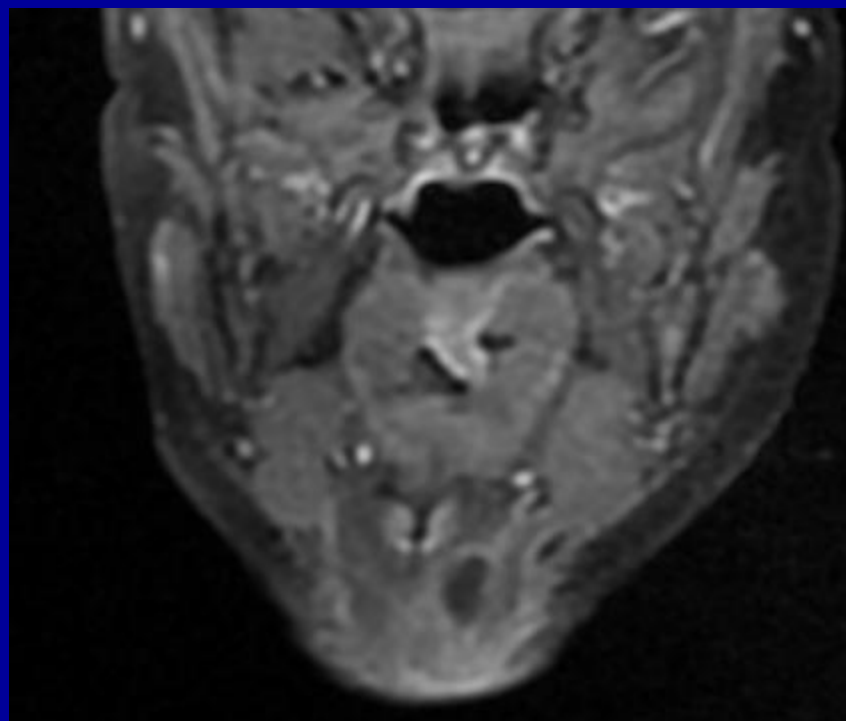
- LP was normal, labs normal, low depalept level.
- During EEG monitoring the patient had a convulsive attack and seizure activity localized to the left hemisphere.







- 3 y/o with 2 episodes of anterior neck infection



- 45 y/o, with ALL, s/p allogeneic BMT about 3 month prior to presentation.
- Hospitalized with colon GVHD and positive CMV from colon.
- First CT was performed about 1.5 months from admission due to fever and headaches.
- First MRI was obtained 4 days later
- 2nd MRI 1w after 1st MR and post biopsy

- Labs during 1st CT showed neutropenia, thrombocytopenia and anemia
- LP at that time grew no organism, no evidence for fungi, virus or toxo. Protein CSF was elevated (148 mg/100ml), normal glucose. 6 wbc, no malignant cells on cytology. Repeated LP 3w later showed same results except for ↑ glucose in CSF.
- A biopsy between the 1st and 2nd MRI showed no evidence for malignancy.

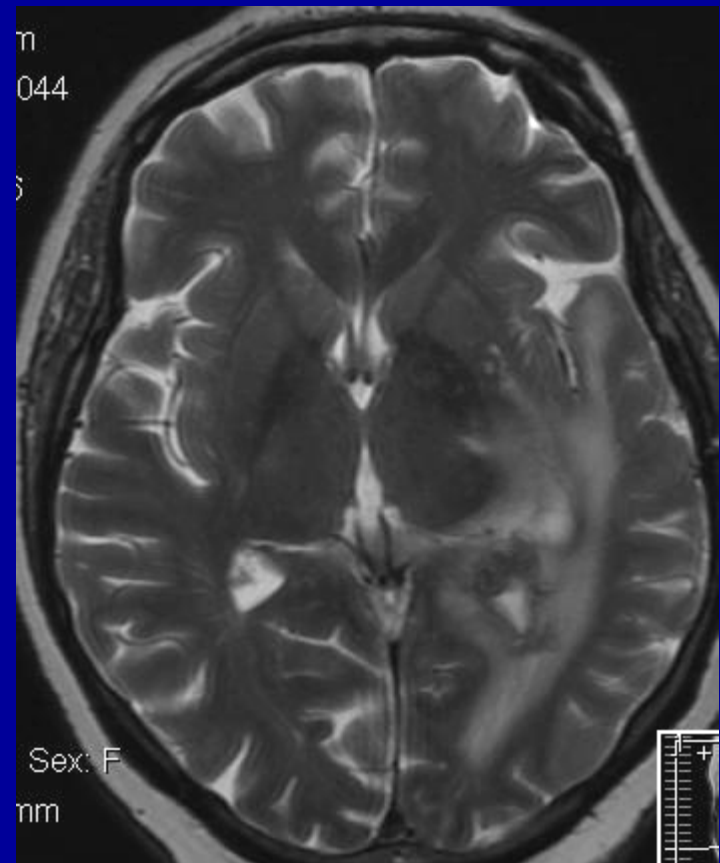
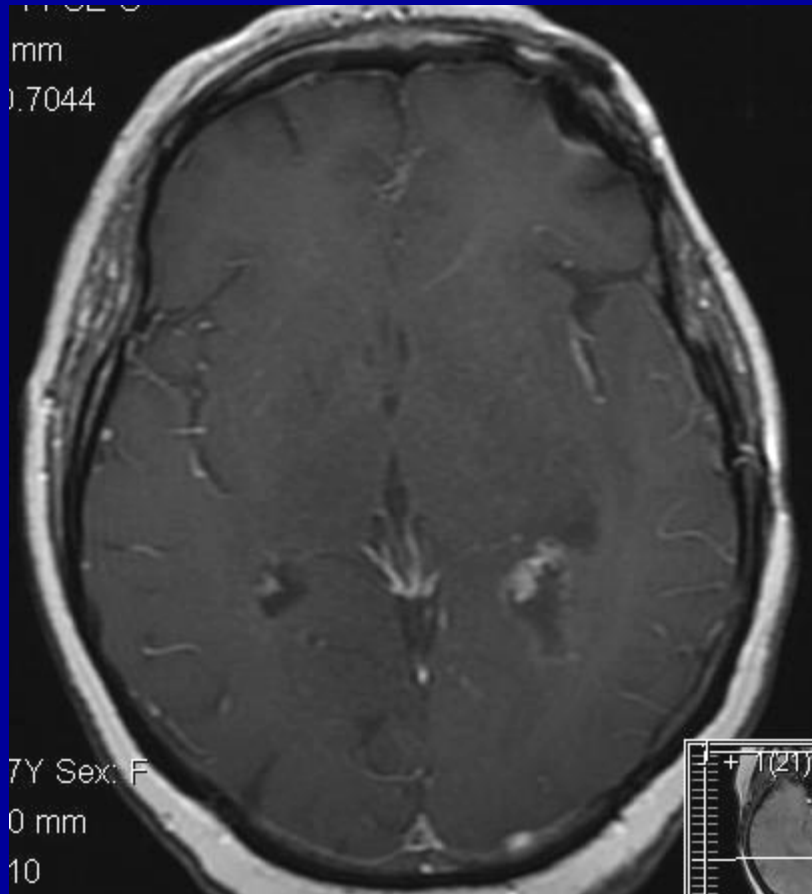


CT-iv

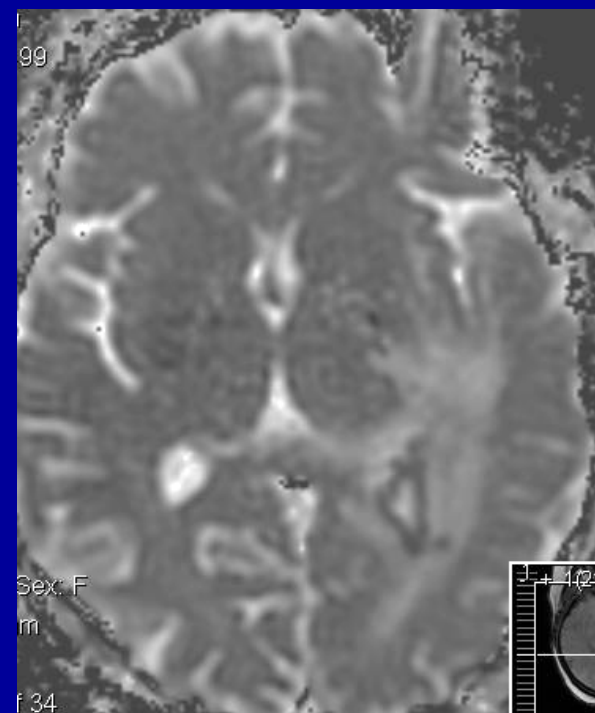
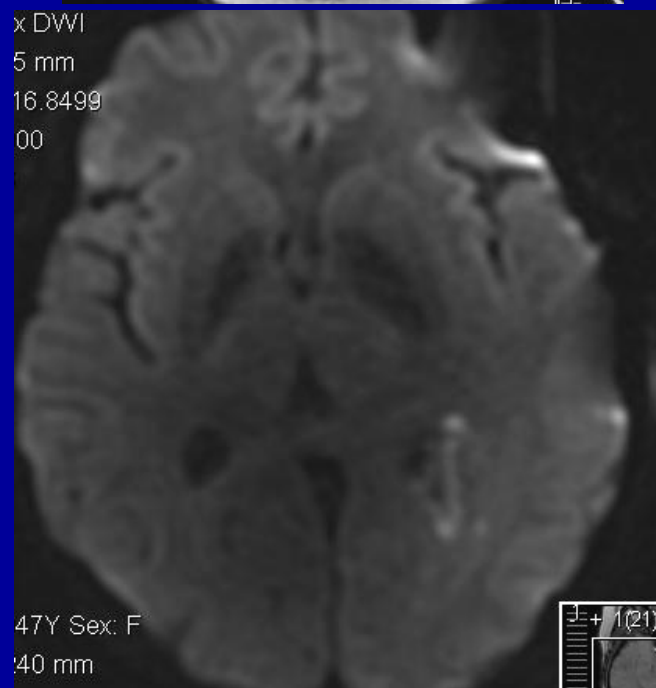
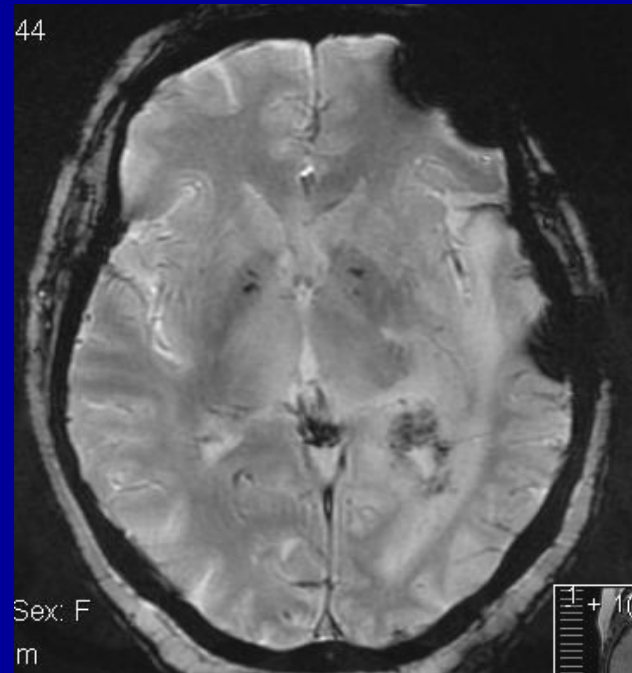
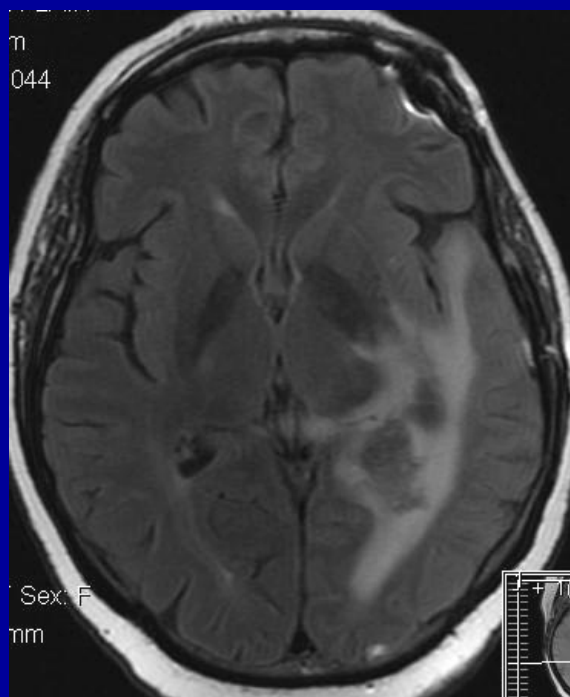


CT+iv

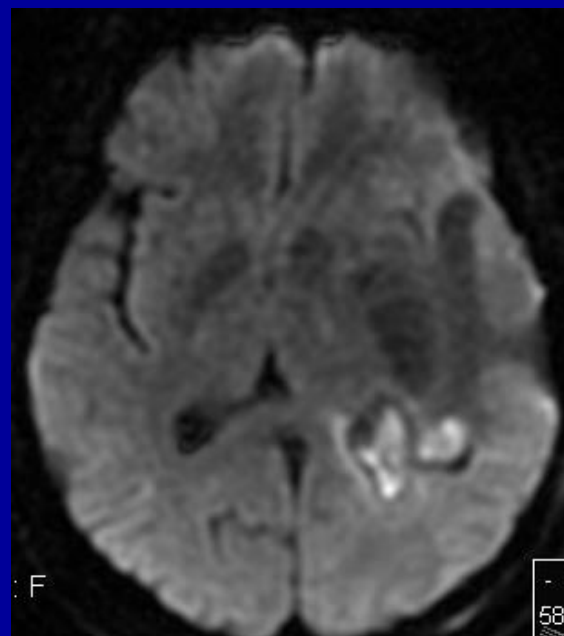
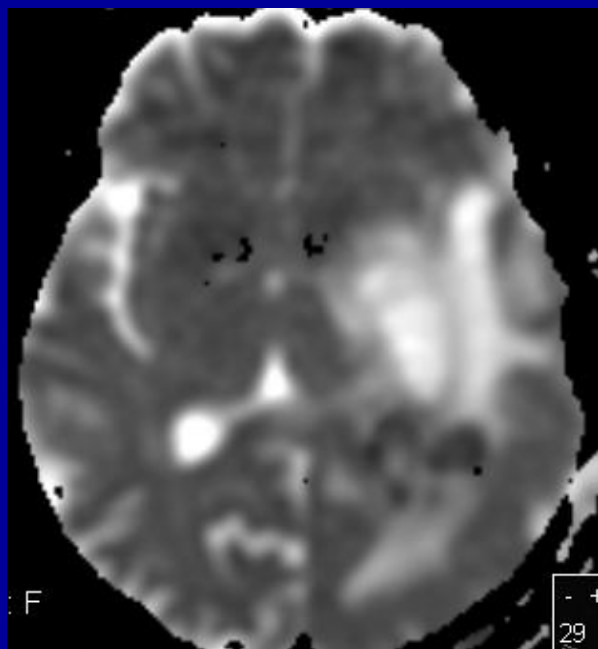
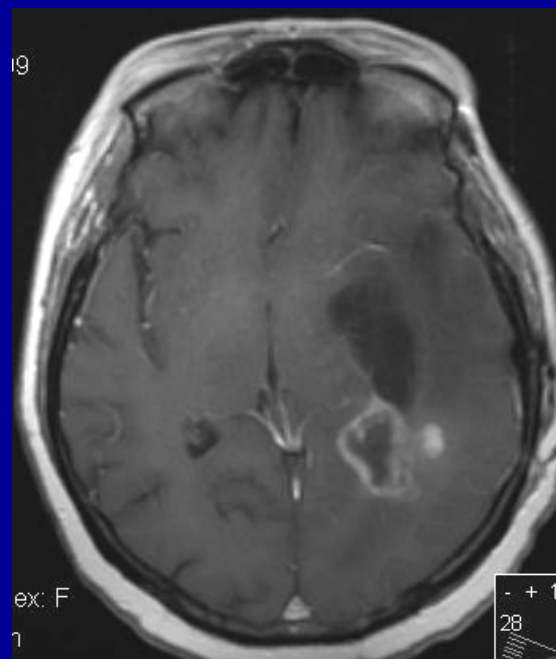
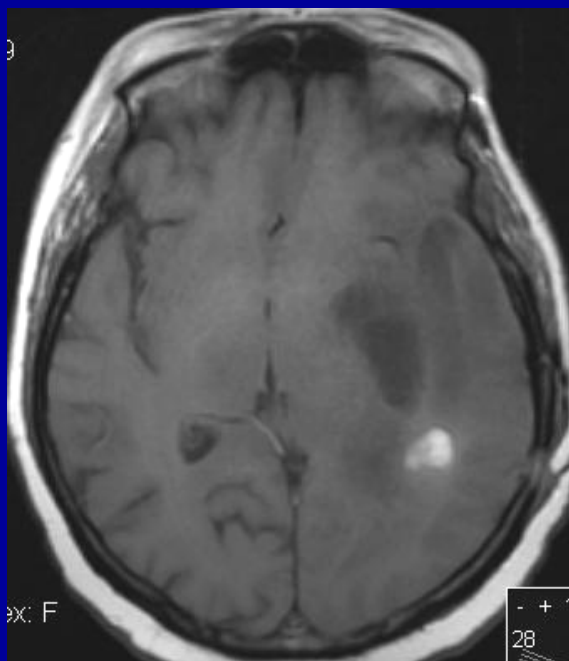
1st MRI

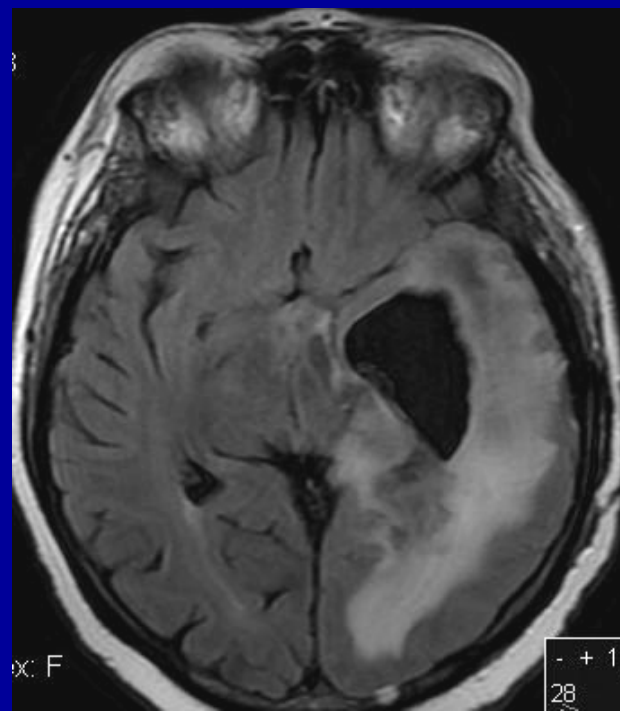
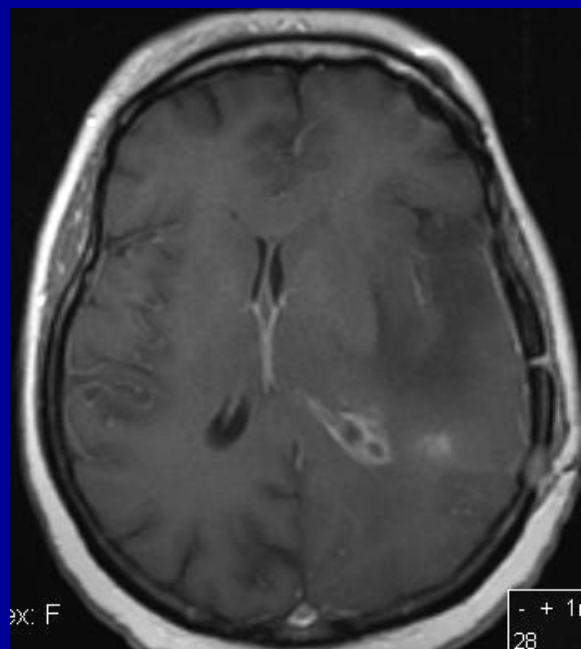
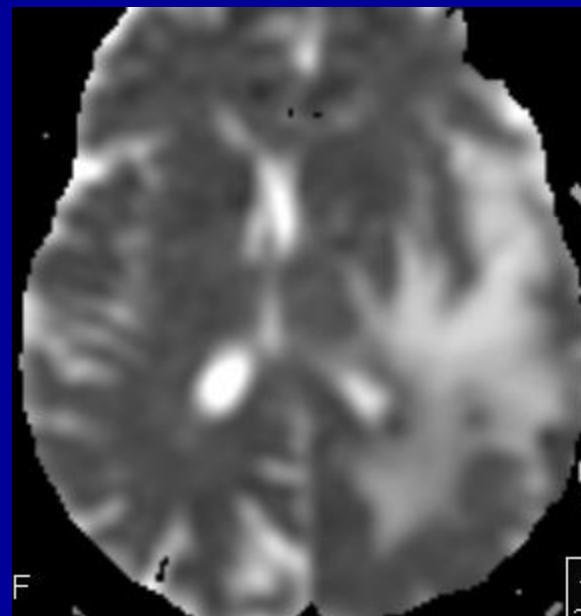
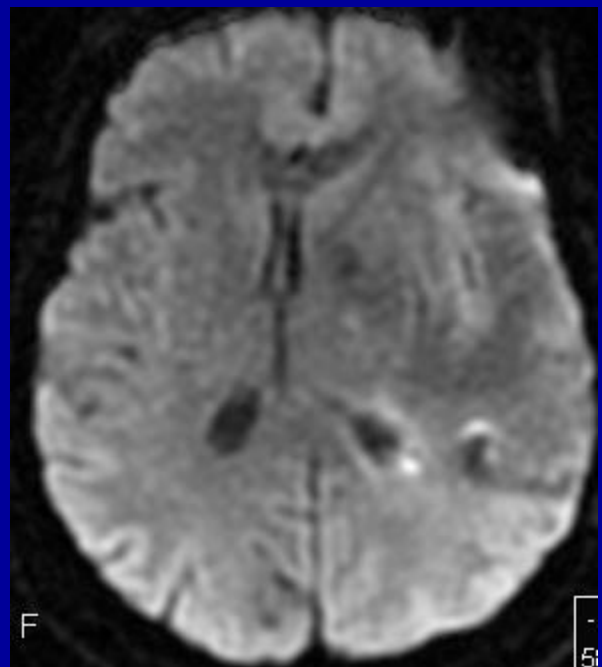


MRI 4 days after CT



2nd MRI, 1 week later, post stereotactic biopsy





- **Referred from ER for second opinion regarding new neurologic symptoms**
- This is a 55 year old male patient who is known to have multiple myeloma on chemotherapy and palliative radiotherapy last year.
- He presented to the ER with 2 months history of Right lower limb weakness and left lower limb numbness. Since 3 days the patient is feeling that the weakness is increasing.
- He is having difficulty to walk without assistance. He is also having decrease of pain sensation in the Left Lower limb.
- No urinary or bowel dysfunction. No loss of sensation in the perineum area.
- Patient went to AD by car and was sitting in the conference for about 4 hours, and then he felt that his weakness increased.
- The patient stopped taking Gabapentin by himself for sometime because he feels that it is not useful.

- **CNS Evaluation**

- Cranial nerves: II-XII: intact.

- Motor: Tone: normal

- Power: Upper limbs 5/5 bilateral

- Lower limbs: RT: 4-/5 proximal and distal, more in the flexion

- LT: 5/5

- Reflexes: T B Brachio K

- A Planter

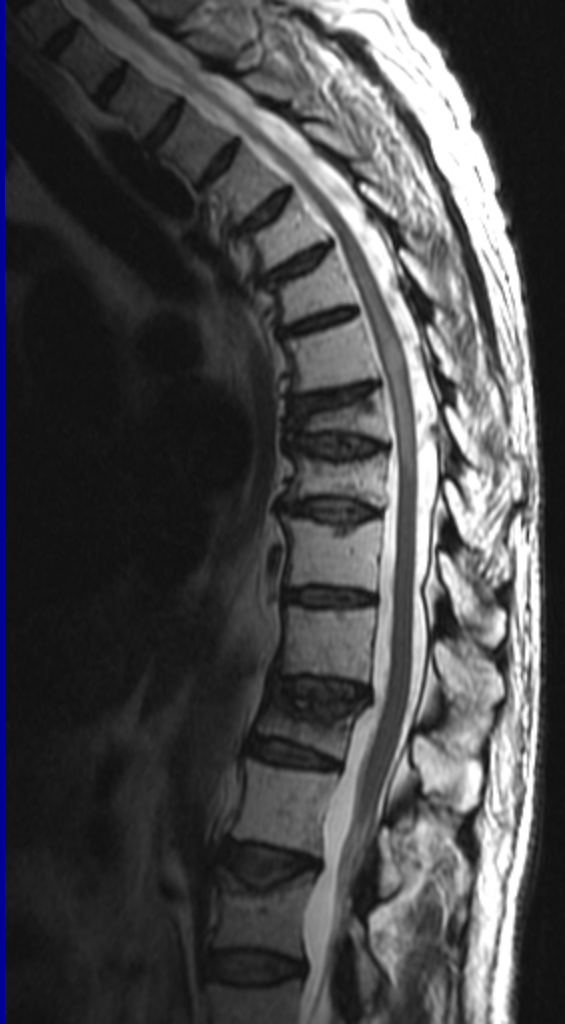
- RT: ++ ++ ++ ++

- ++ +++ +++ Extensor

- LT: ++ ++ ++ ++

- ++ ++ ++ Equivocal

- Sensory: Decrease pain sensation in the left lower limb, Light touch is intact.



nts
ou
om



