Patient: DUARTE, NATHAN
PHN: [redacted] Gender: Male
Date of Birth: 1991 SEP 13 Age: 33Y

fraserhealth

Medical Imaging Report

Procedure Description: Head Contrast
Body Part: HEAD
Modality: MR
Organization: FHA-SE
Exam Date/Time: 2022 OCT 30 09:23
Accession: SMMR2230100072

Patient Known at Radiology as:
Patient Name: DUARTE, NATHAN MATTHEW
Date Of Birth: 1991 SEP 13
Sex: M
MRN: LM162072
Ordering Physician: Murray, Craig

FRASER HEALTH AUTHORITY Signed
Surrey Memorial Hospital Medical Imaging Report

ACCOUNT#: SM191462/22 UNIT #: SM01274690
PHN: 9134227721 NAME: DUARTE,NATHAN MATTHEW
PT.TEL#[redacted]AGE: 31 SEX: M
DOB: 13/09/1991 REG CAT: S CLI LOC: SM MI
ADMIT: 30/10/22 DISCHARGE:

Order Dr: Murray,Craig S Family Dr: Chang,Adam Y
Attend Dr: Murray,Craig S Dictate Dr: Neyestani,Amir H

EXAM DATE:30/10/22 PACS ID#:LM162072 BCCA#:

ORDERS: REPORT#:3110-0454
3010-0072 MR/Head Contrast

EXAM TYPE:
MR Head Contrast

HISTORY:
NEW DX LIKELY LARGE GLOIMA WITH SHIFT OR MASS EFFECT .

COMPARISON:
Comparison is made to prior CT scan dated October 28, 2022.

TECHNIQUE:
Sagittal 3D T2 FLAIR with reformats, DWI/ADC, 3D MP-RAGE with reformats, T2 2D post, SWI, axial 3D MP-RAGE postcontrast with reformats and
subtraction imaging.

FINDINGS:
The MRI confirms the presence of an intra-axial mass centered in the right occipital and temporal lobe. It measures 7.5 x 4.9 cm in transverse
dimension and 7.1 cm in craniocaudad dimension. The mass demonstrates intermediate to high T2 signal and intermediate to

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low T1 signal.

Post-contrast administration, there is a focal enhancing nodule along the posterolateral margin of the mass measuring 14 x 14 mm in transverse
dimension. Minimal peripheral heterogeneous enhancement present throughout the remainder of the mass.

There is a mild degree of surrounding vasogenic edema. There is marked mass effect on the surrounding structures with effacement of the occipital
horn of the right lateral ventricle and effacement of the overlying sulci. The mass extends into the splenium of the corpus callosum and crosses the
midline to the left by approximately 6 mm. There is also subfalcine herniation to the left measuring approximately 6 mm. There is associated
obstruction of the temporal horn of the right lateral ventricle.

The inferior medial margin of the mass compresses the right cerebral peduncle and extends into the ambient cistern.

No other mass lesion is seen. The intracranial enhancement pattern is otherwise normal. No leptomeningeal disease identified.

The paranasal sinuses and mastoid air cells are well aerated. No acute osseous finding.

The optic nerve sheaths are mildly distended with fluid likely relating to raised intracranial pressure. The orbital structures and infratemporal
fossa are otherwise within normal limits.

IMPRESSION:
1. There is a large intra-axial tumor centered in the right temporal and occipital lobes as outlined in detail above. This likely relates to a
primary CNS malignancy such as a moderate grade astrocytoma. Urgent neuro surgical referral advised.
1.

Dictated By: Amir H Neyestani FRCPC
<Electronically signed by Amir H Neyestani FRCPC in OV>

Report was generated in Voice Recognition System (*FFI*)
D: NEYESTAA; 31/10/22 0850 E: ; 31/10/22 0850 S: *; 31/10/22 0906

cc: Bigder,Mark G; Chang,Adam Y; Murray,Craig S

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clinicians should contact the author directly through this FHA Medical Imaging department or email FHRadQuality@fraserhealth.ca. If you are a patient

NOTE: This is information at a point in time and updates/addendums may not be fully reflected on printed copies. The report should be reviewed again online to ensure the most current information is used before making clinical treatment decisions.