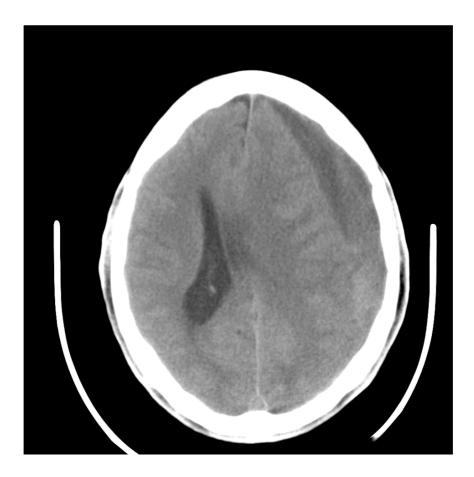
VAQ 2009.1.8 (CT)

An 89 year old woman presents to your emergency department with a two week history of several falls and new right sided weakness. A non-contrast CT head scan is performed



Describe and interpret her CT scan. (100%)

The history and CT suggest chronic left subdural haematoma, with pressure effect including midline shift. This would be treated with neurosurgical admission for urgent decompression but this may be mitigated by frailty, functional state / futility considerations, and the patient's wishes in an 89yo.

Important bits in **bold**

CT brain

axial plane

level of lateral ventricles

left sided abnormal radiodensity

approx 3cm at deepest point

extends from falx anteriorly to occipital region posteriorly

crosses suture lines

extraaxial

layering with anterior area of hypodensity, posterior area of hyperdensity cresenteric rather then lenticular

consistent with subdural haematoma

effacement of left lateral ventricle

loss of sulci

midline shift approx 2cm at this level

grey-white junction preserved

Consistent with large left chronic subdural with pressure effect and midline shift (or subacute but NOT acute)