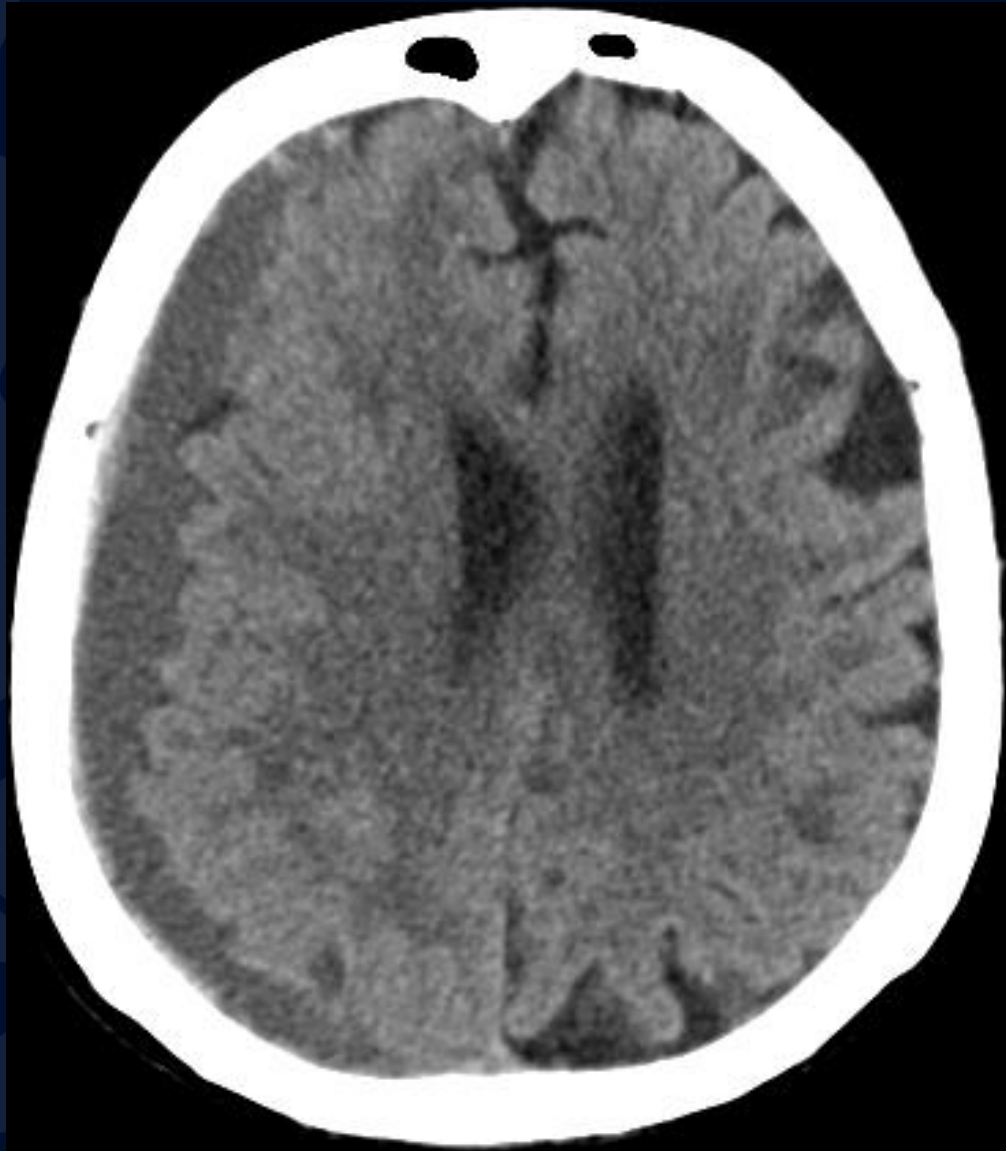


76 F w/ delirium/confusion

Daniel Chen, MD

Elena Violari, MD

Leo Wolansky, MD



Axial
CT

Coronal CT

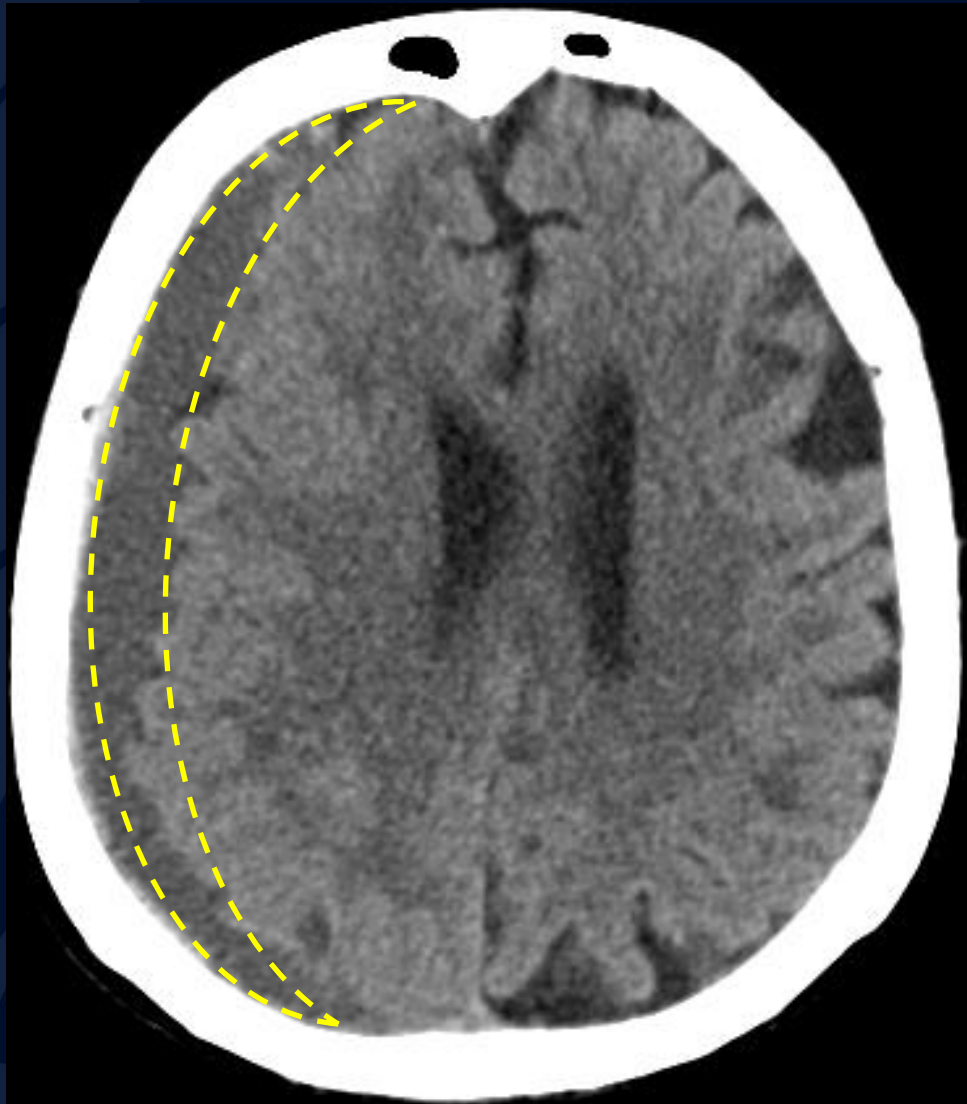


A large, stylized oak leaf graphic in a dark blue color, positioned on the left side of the slide. It features detailed vein patterns and a lobed edge.

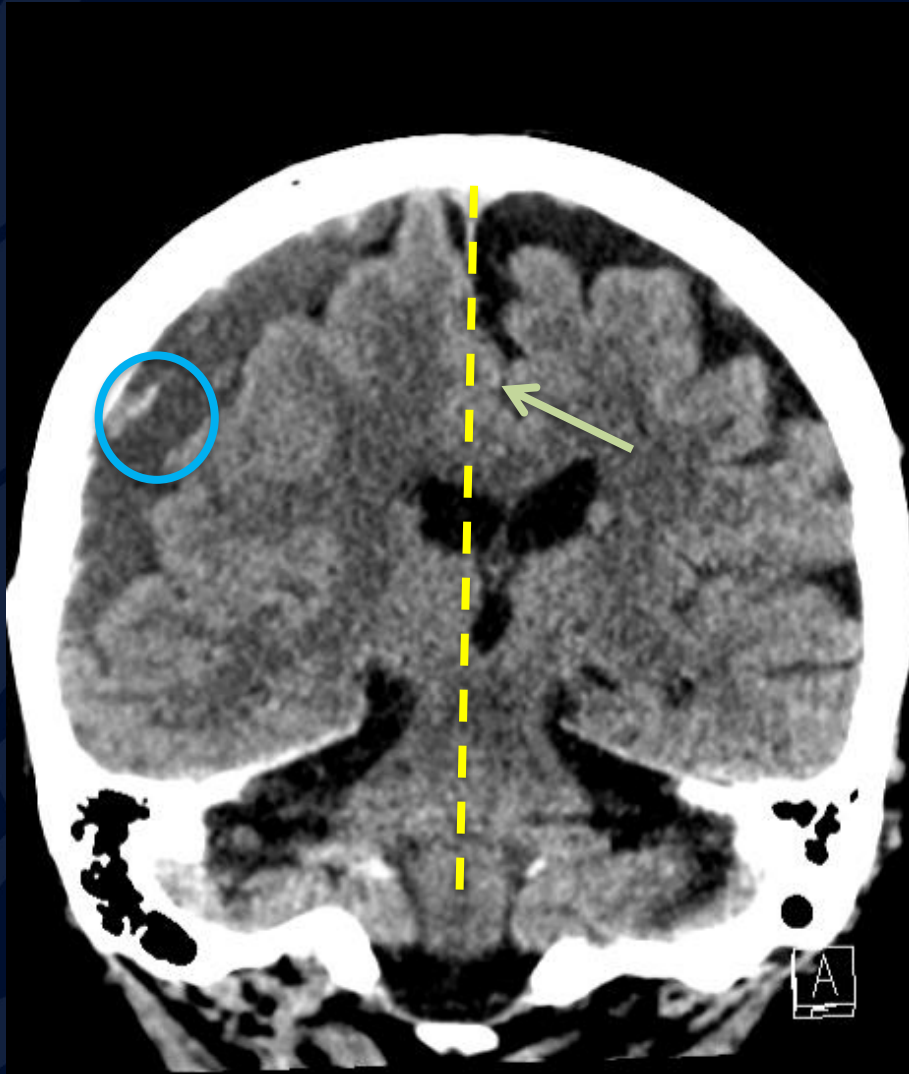
?

A large, stylized oak leaf graphic in a dark blue color, positioned on the left side of the slide and partially overlapping the title text.

Chronic subdural hematoma



- **Crescent shaped** extra-axial collection
- Can cross sutures but not dural attachments
- Density varies w/ age of infarct – heterogeneity common



- Mass effect with **midline shift** and subfalcine herniation
- **Enhancing internal membranes or septations** are common

Chronic subdural hematoma

- Crescentic extraaxial collection that spreads diffusely
- Mechanism - trauma
- Most commonly supratentorial
- Often septated, with enhancing membranes
- Mixed-age hemorrhage common
- In contrast enhanced studies, cortical vessels are inwardly displaced

Chronic subdural hematoma

- Most commonly hyperintense on T1, T2, PD, -FLAIR, although signal is variable in intensity depending on chronicity
- Differential includes subdural hygroma (non-enhancing, no membranes, CSF density), subdural effusion (associated w/ meningitis)

References

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