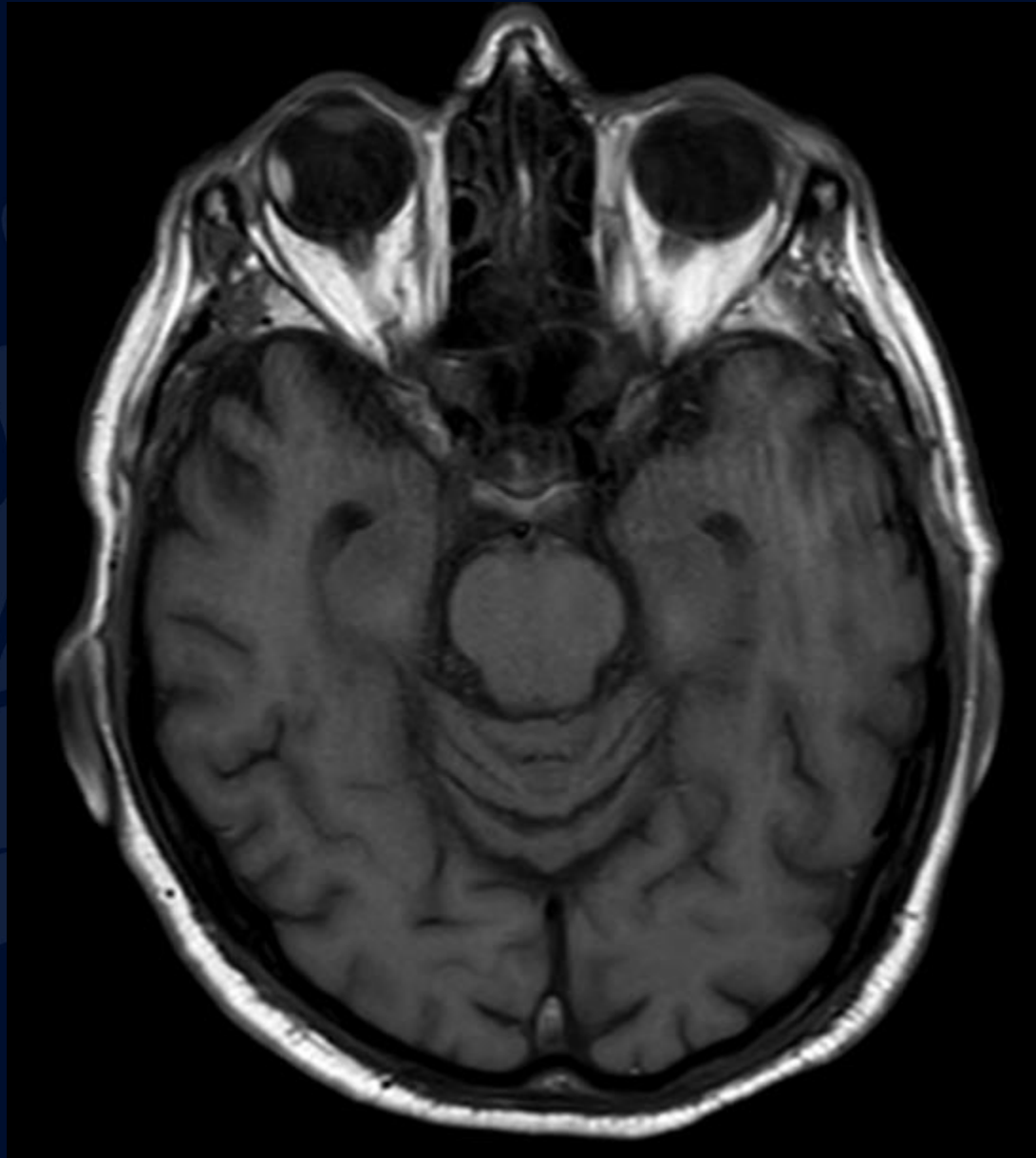


# 50-year-old male presenting with visual complaints

Andrew Klufas, MD MBA

Leo Wolansky, MD

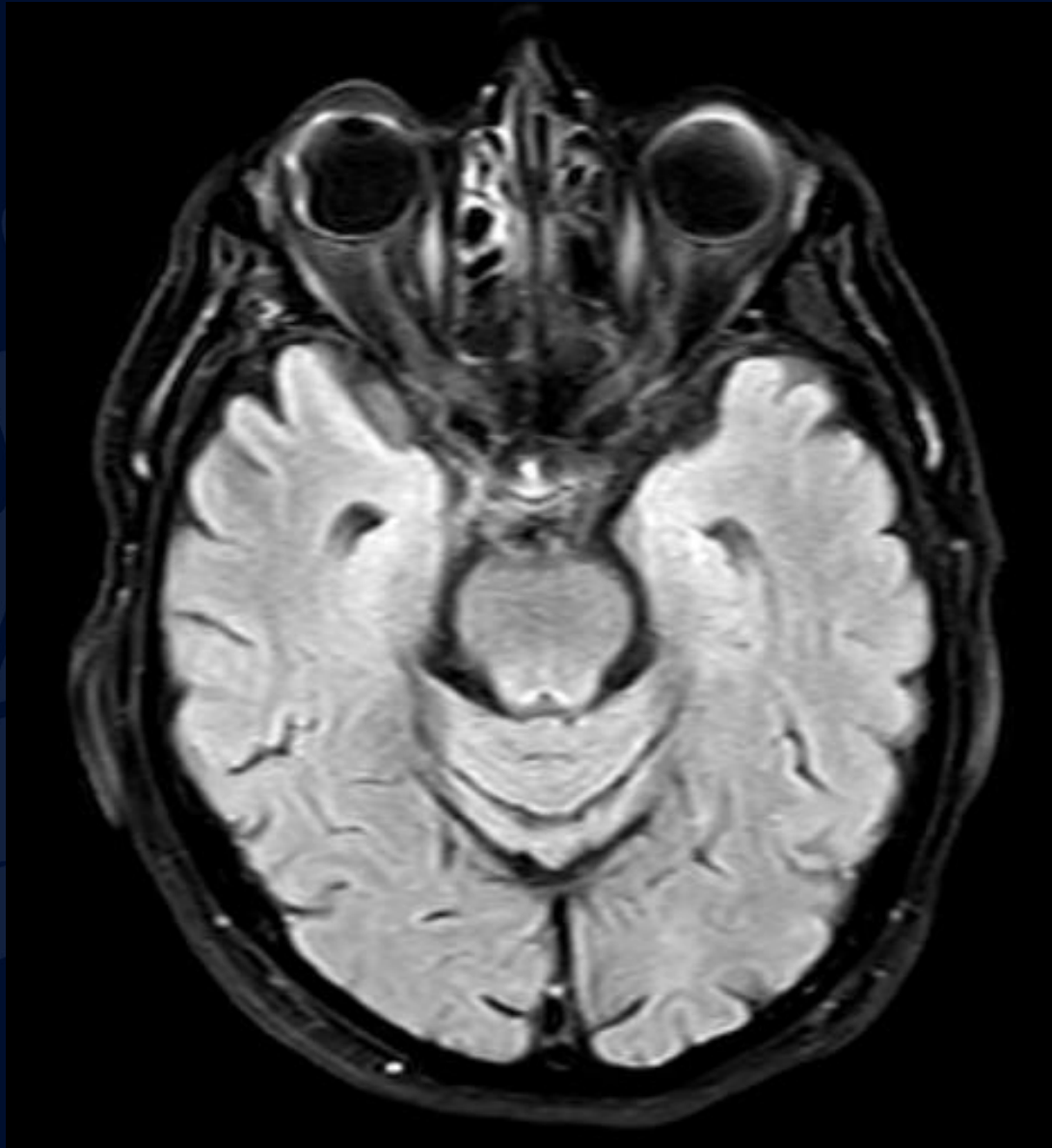
# MRI Axial T1



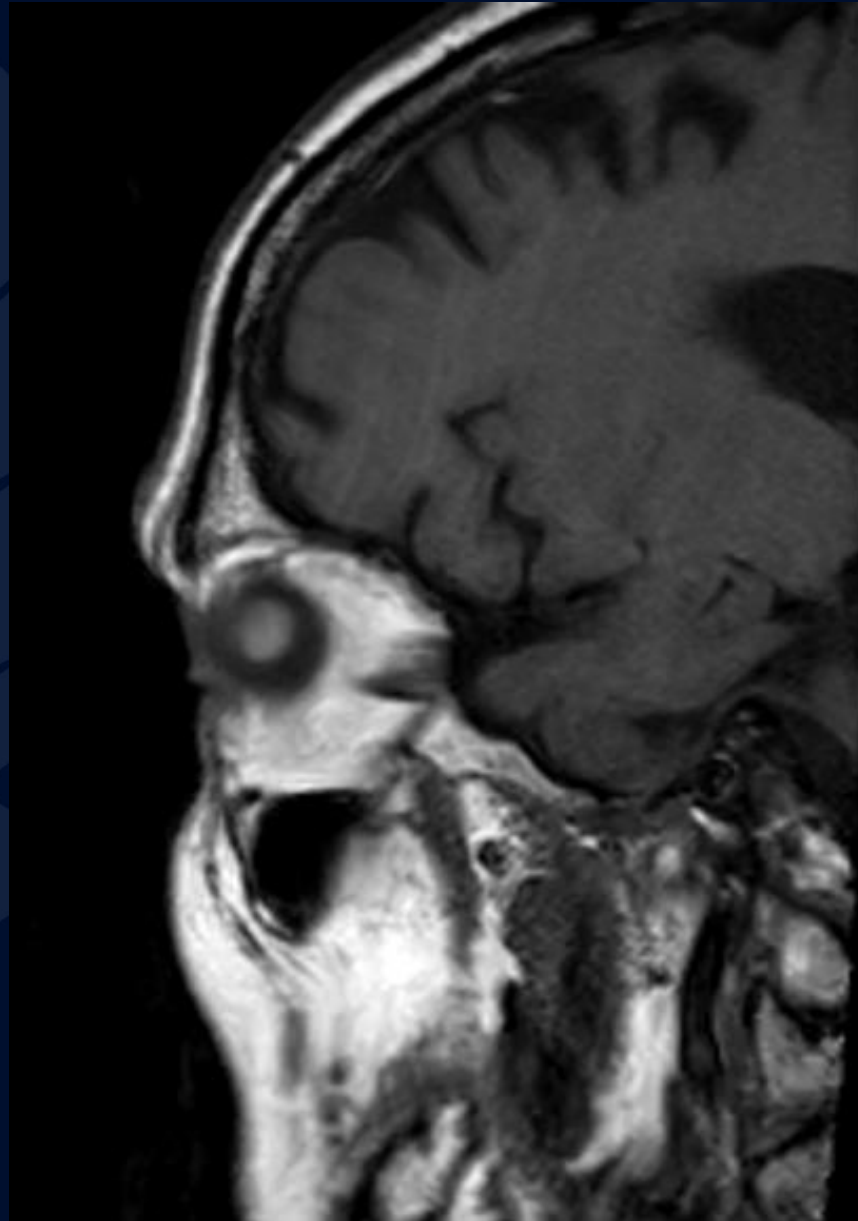
# MRI Axial T2



# MRI Axial FLAIR



# MRI Sagittal T1





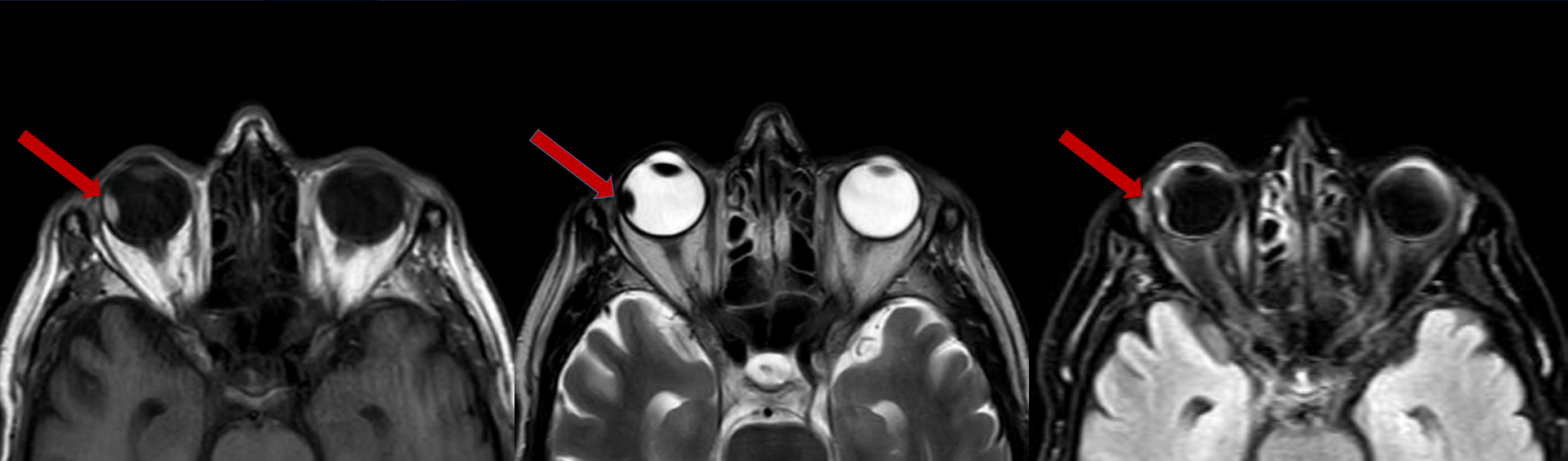
?

# Choroidal Melanoma

T1

T2

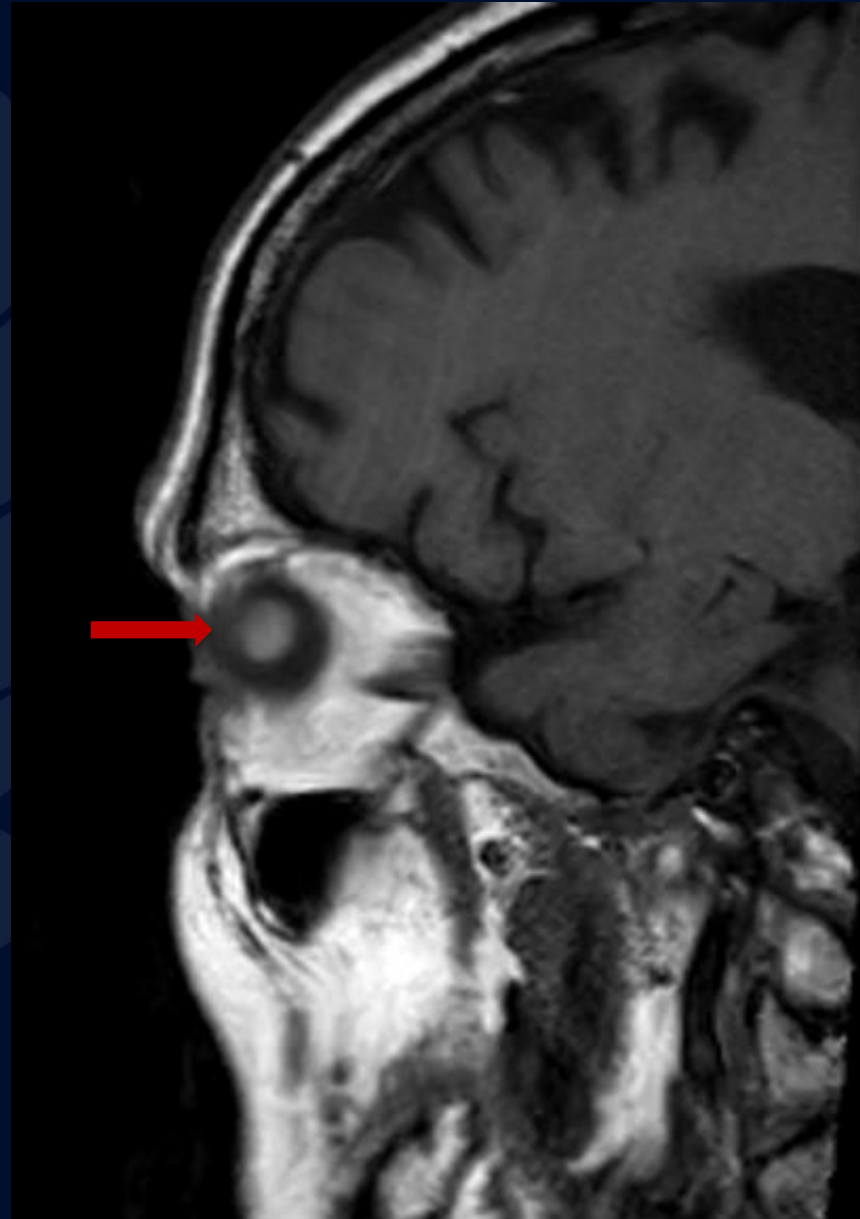
FLAIR



Right lateral intraorbital mass is hyperintense on T1 and hypointense on T2 and FLAIR



# MRI Sagittal T1



Hyperintense  
intraorbital mass  
visualized

# Choroidal Melanoma

**Clinical Presentation:** Choroidal melanomas tend to be incidentally found on imaging or fundoscopy, unless located near the iris, where they can be seen through the pupil

**Clinical Pearls:** Malignant melanoma of the uvea is the most common primary intraocular malignancy, with incidence directly increasing with age

## Imaging Features

- CT
  - Elevated, hyperdense, sharply marginated lenticular or mushroom shaped lesions
  - Enhancement noted after contrast administration
- MRI
  - **T1:** Moderately high signal (melanin and hemorrhage)
  - **T1 C+:** Enhances, does not suppress on fat suppression sequences
  - **T2:** Moderately low signal

# Choroidal Melanoma

## Differential Diagnosis

- Uveal Metastases
- Choroidal Detachment
- Choroidal Hemangioma
- Choroidal Cyst
- Uveal Neurofibroma
- Uveal Schwannoma
- Retinoblastoma

# References

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