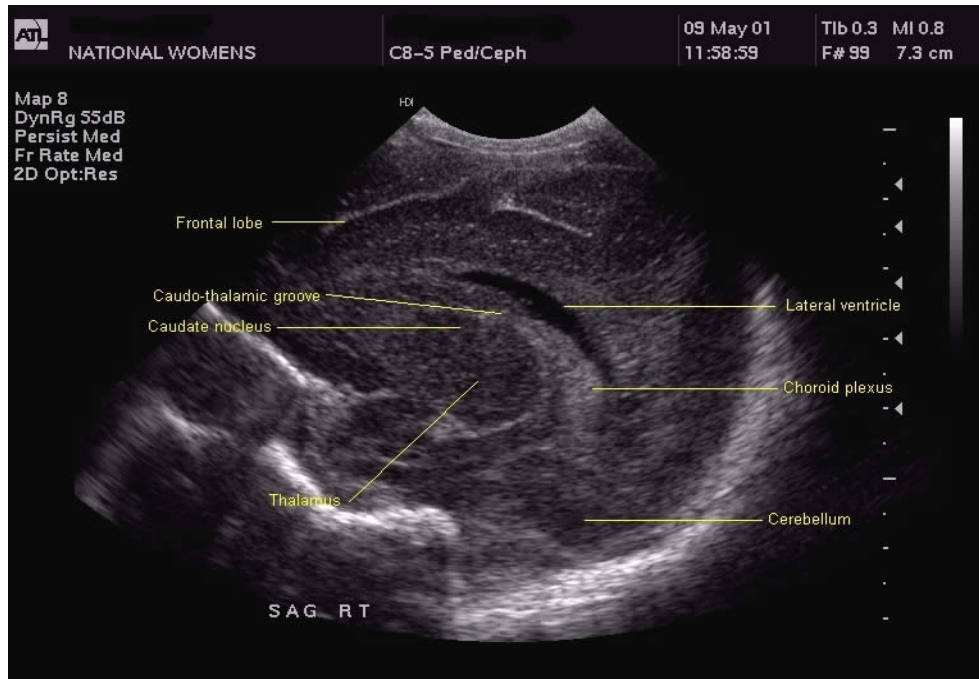
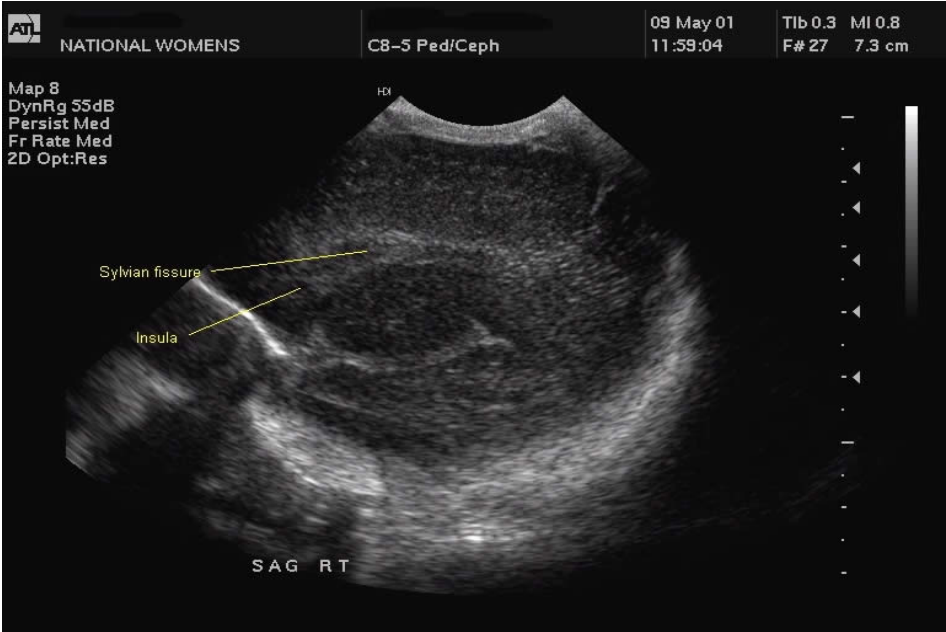


APPENDIX (2)
NORMAL BRAIN ANATOMY OF US:
Sagittal section view.

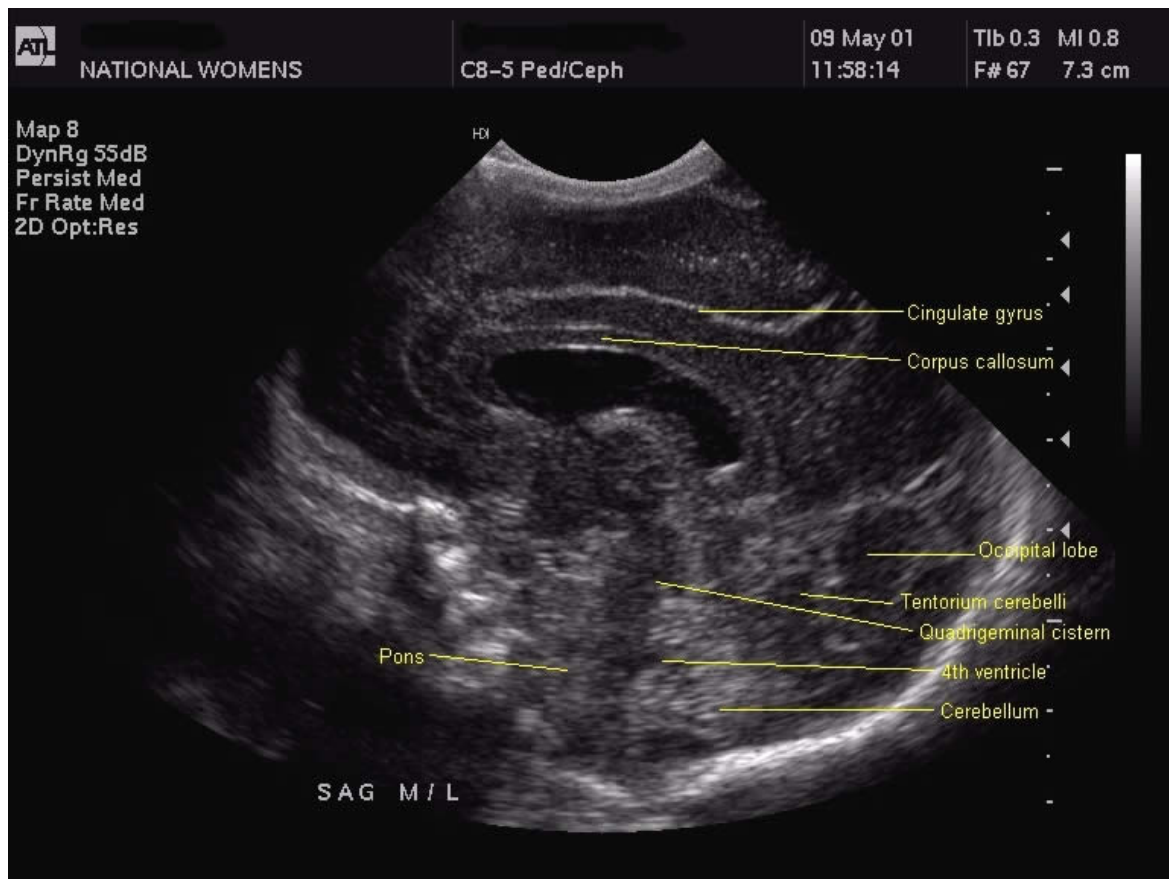


Show parasagittal view of the cranial U/S.

Appendices

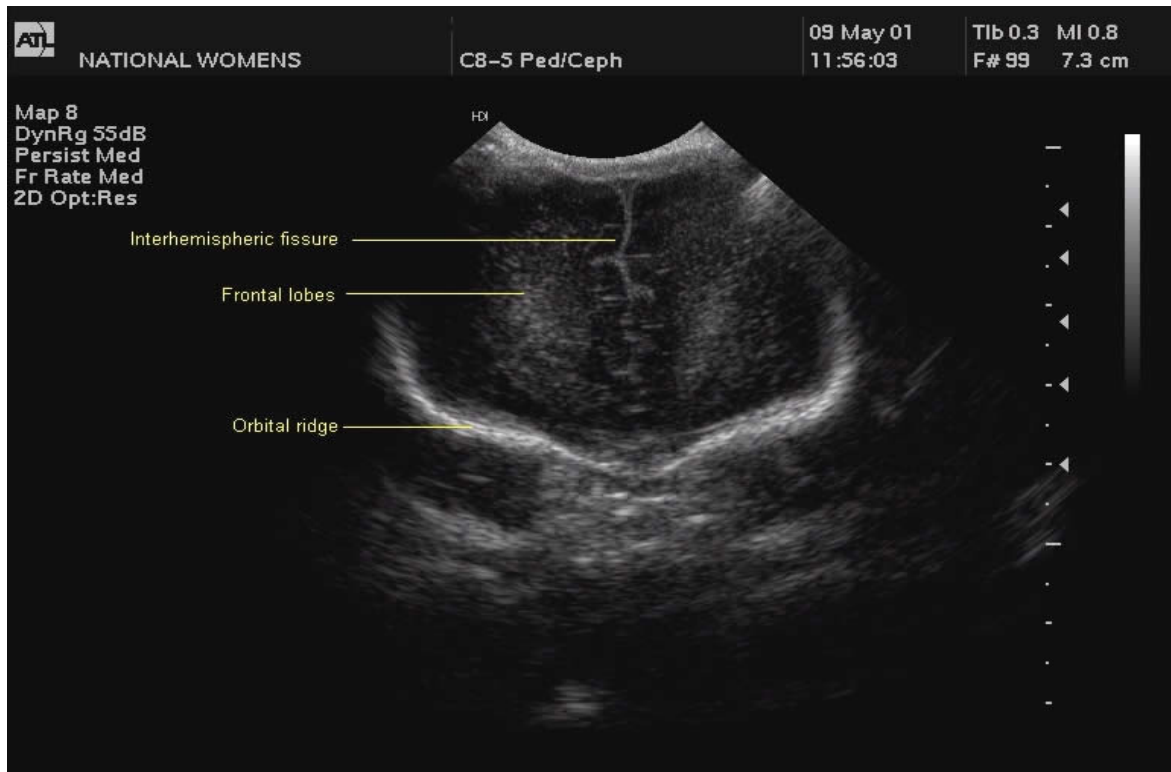


Show the far parasagittal view of the cranial U/S.

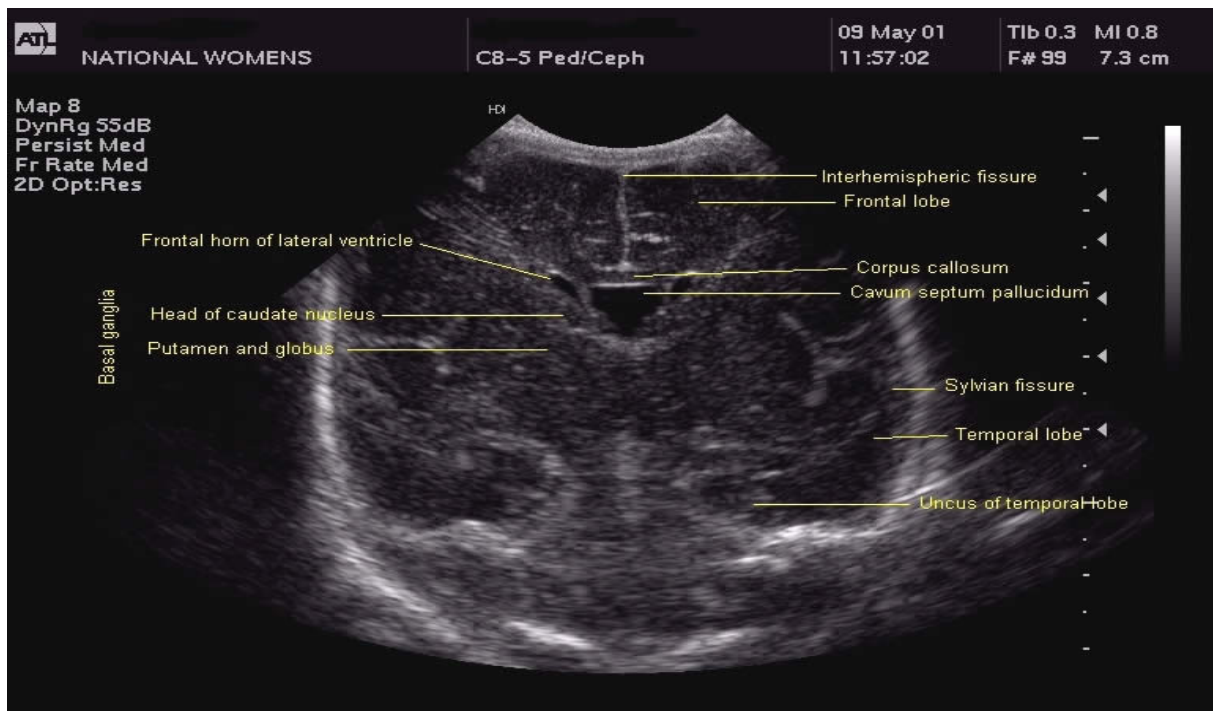


Show mid sagittal view of the cranial U/S.

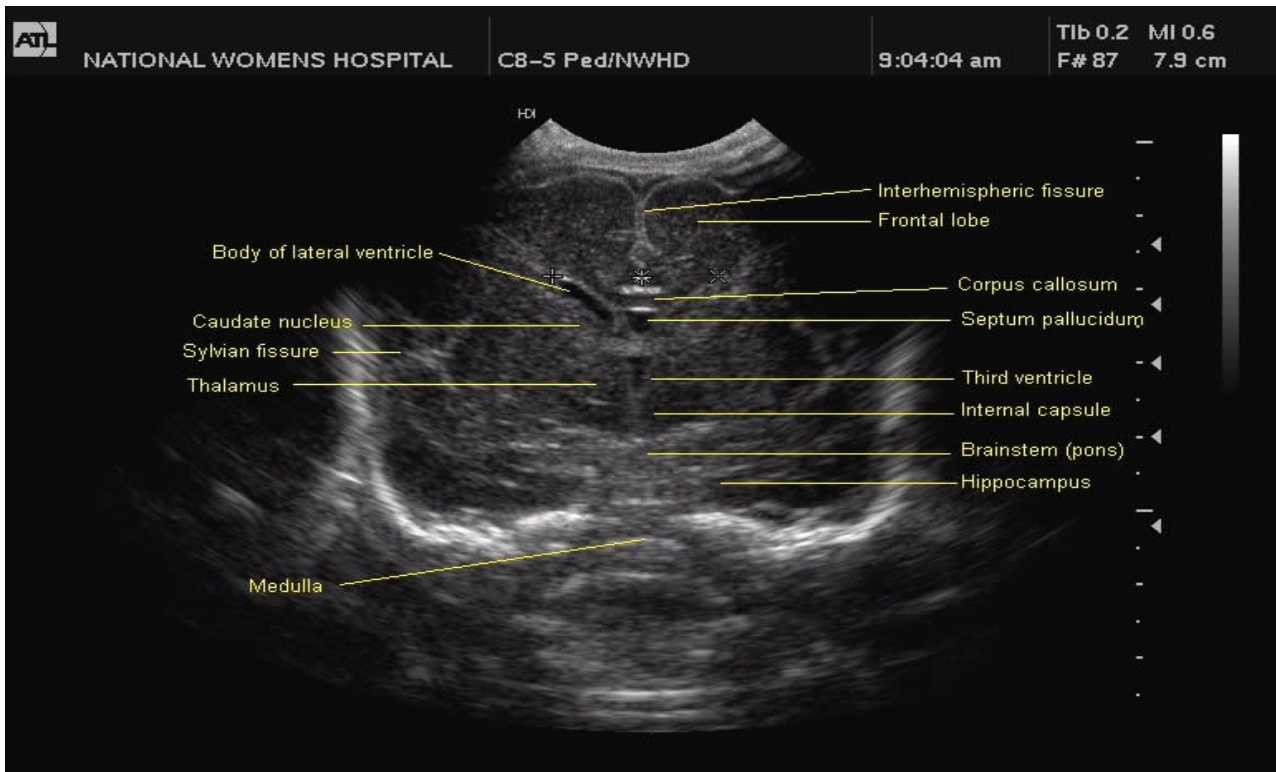
Coronal section view.



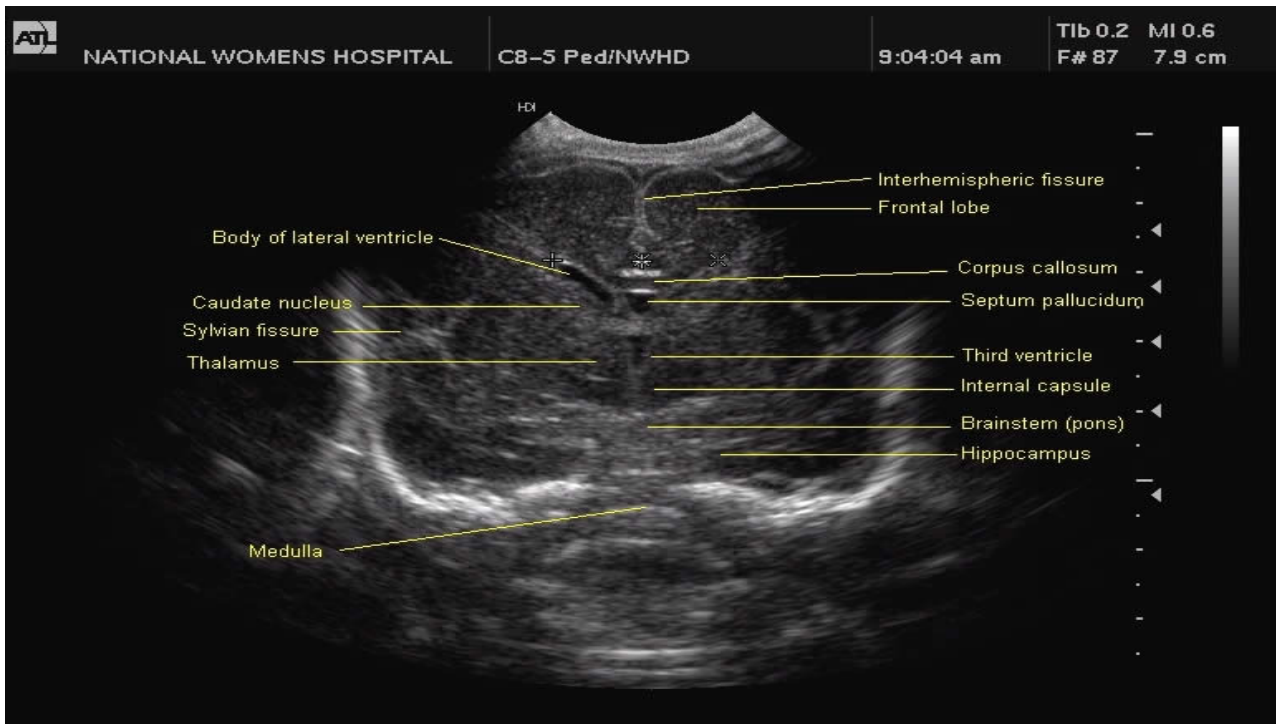
CP1 the frontal hemispheres of the cranial U/S



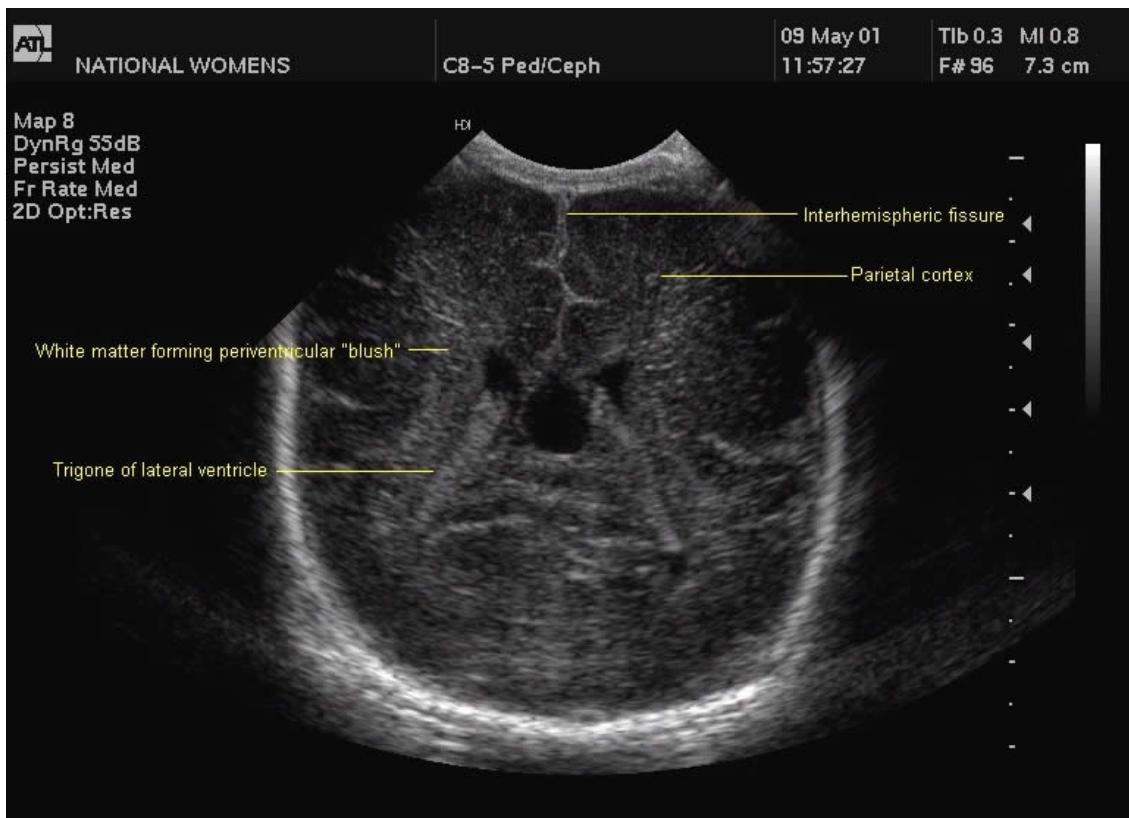
the CP2 at the level of the frontal horns or bodies of the lateral ventricles of the cranial U/S.



CP3 appear at level of the third ventricles of the cranial U/S.

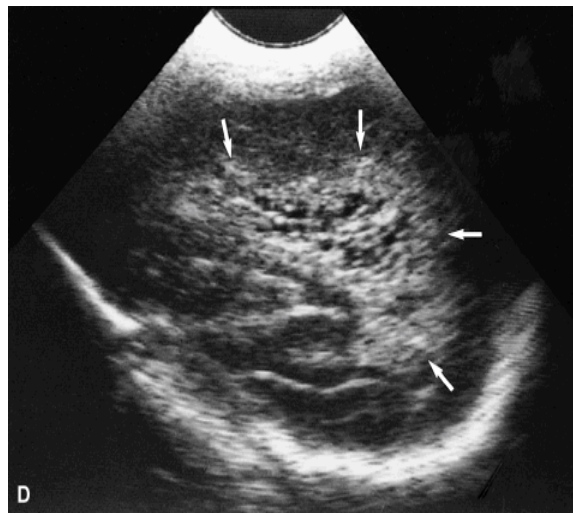
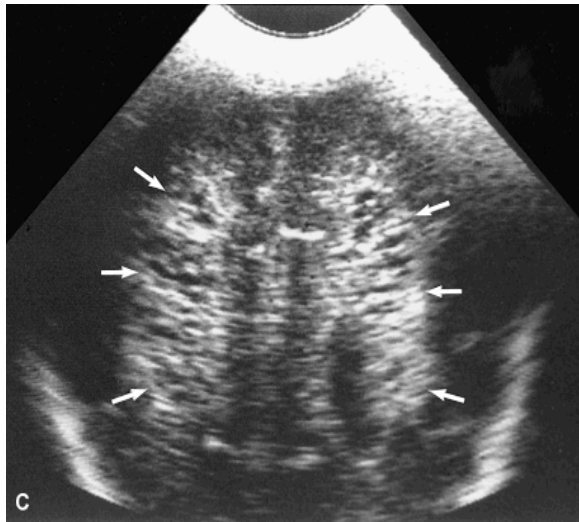


the CP4 the level of the quadrigeminal plate cistern and the cerebellum of the cranial U/S.



the CP5 appear the choroid plexus of the cranial U/S.

US show the HIE appearance.

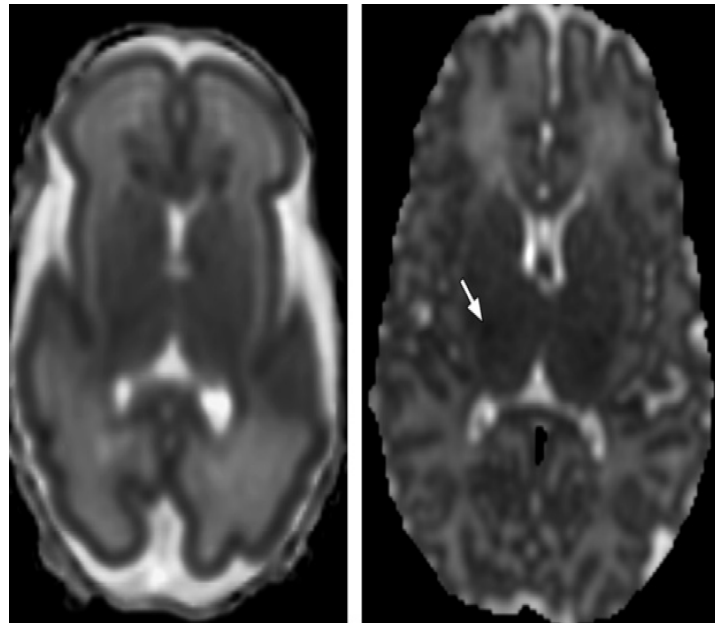


Tiny bilateral cysts in preventricular deep white matter.

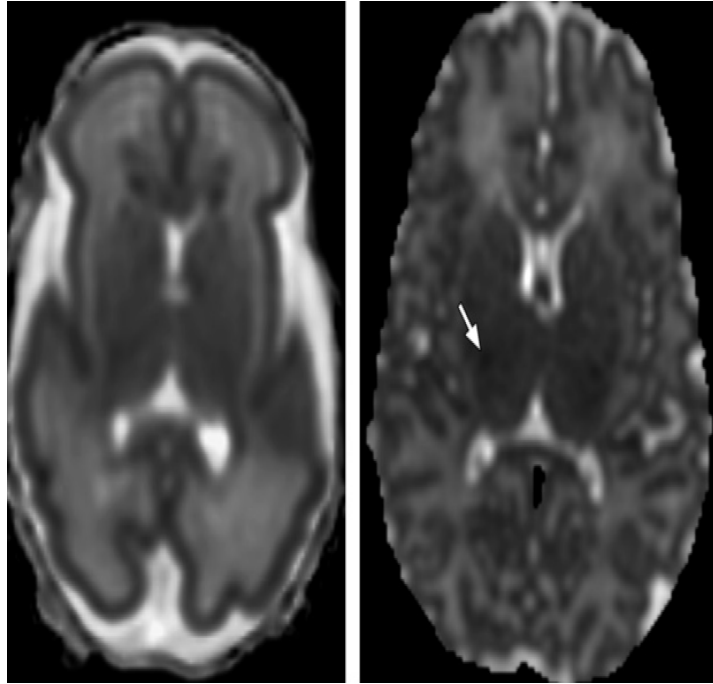


Preintrinsic cystic changes.

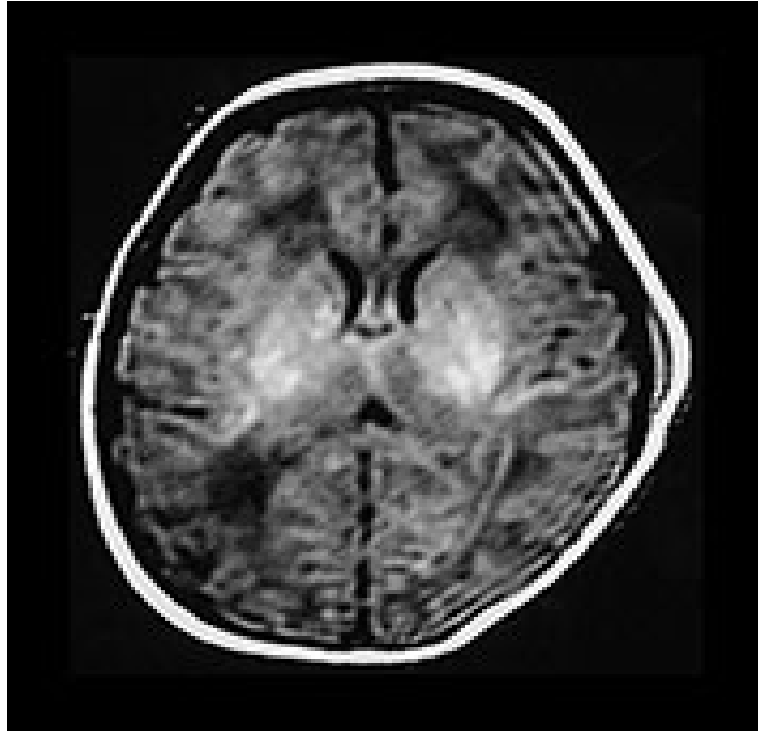
MRI show the HIE appearance.



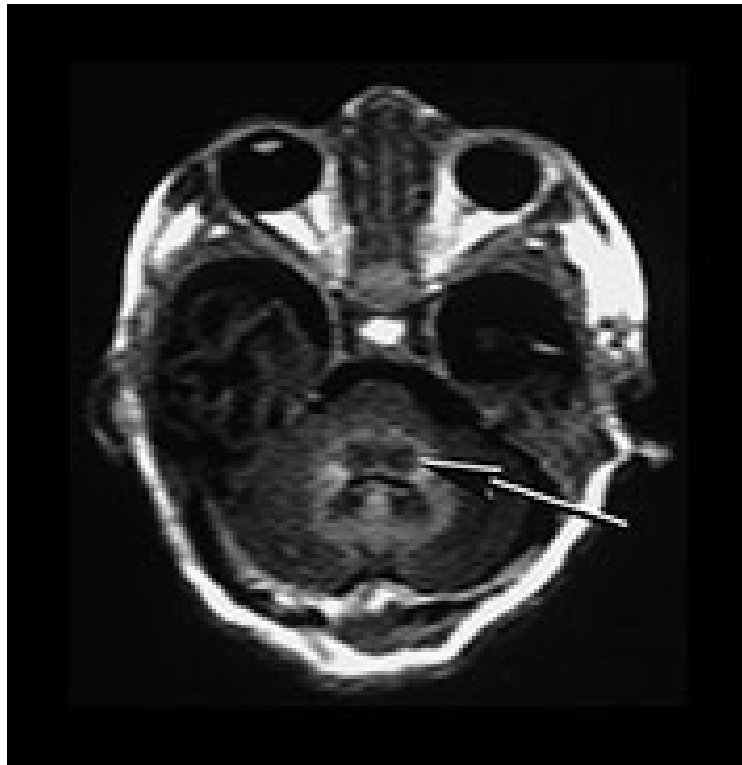
ADC map obtained in a neonate at 26 weeks of gestation shows moderately decreased cortical water diffusion and increased white matter water diffusion.



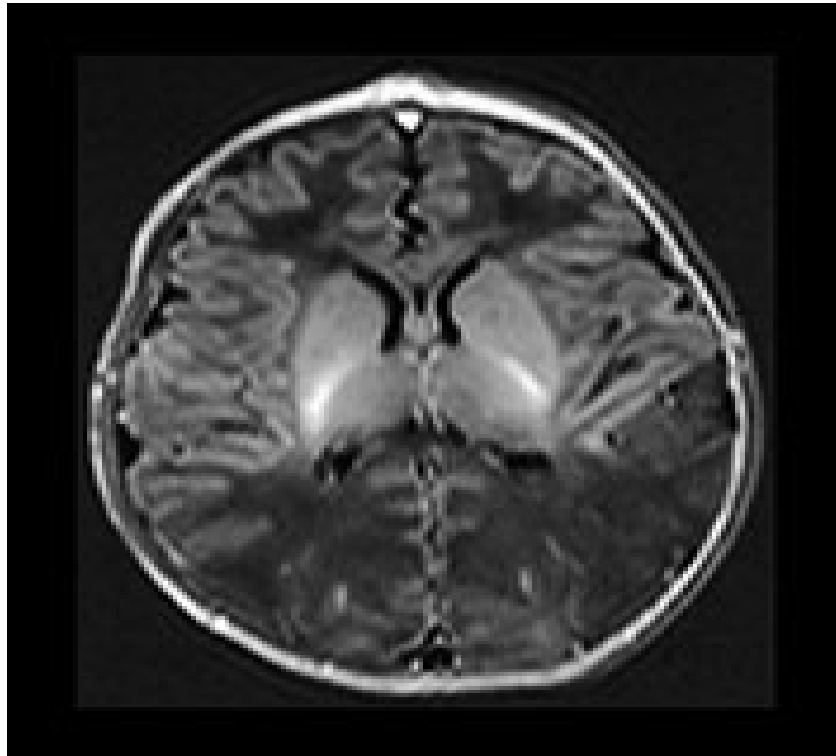
ADC map obtained in a neonate at 38 weeks of gestation shows more limited water diffusion than in a, with resultant lower signal intensity in white matter.



T1 weighted spin echo sequence infant with stage II HIE.



Brain stem lesions. Term infant with stage III HIE. Inversion recovery sequence .
There are bilateral abnormal low signal intensity lesions within the pons and
medulla.



Stage II HIE T1 weighted spin echo sequence. There is a complete loss of the normal gray/white matter differentiation.