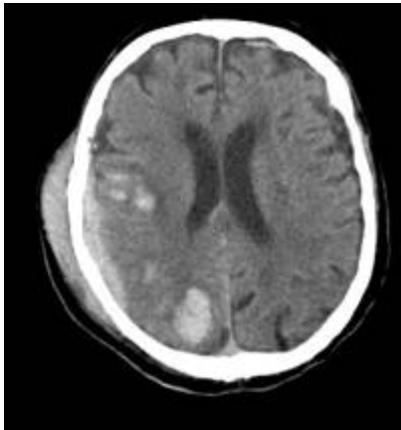


Intracranial acute epidural hematoma diagnosis

CT

Usually biconvex and often due to arterial bleeding.

May cross dural barriers (unlike [intracranial subdural hematoma](#)) such as [falx](#), [tentorium](#).



Right frontotemporoparietal [intracranial acute epidural hematoma](#), up to 1 cm. thick, underlying a broad line of right temporoparietal Right parietal [cephalohematoma](#), up to 1cm. of thickness.

Left parasagittal extra-axial hematoma, 0.5 cm. thick, underlying the portion of the fracture line that passes through the [sagittal suture](#).

Displaced cranial fracture that runs from the supra-orbital portion of the left frontal bone to the right temporal and parietal bone, extending over the sagittal suture.

There are also multiple contusive intraparenchymal right frontoparietal or occipital foci (the largest being 3cm), as well as one in the left insular region (1cm) and another in the left frontal (1.3cm). The latter is accompanied by an extra-axial laminar hematoma with adjacent [subarachnoid hemorrhage](#)

Subarachnoid hemorrhage foci in the most cranial region of the right central sulcus, left superior frontal, right Sylvian sulcus and some bilateral parietal sulci. Right paraseptal intraventricular hematoma focus. Small bubble of left temporal pneumocephalus.

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