Clinical History:
A 64-year-old female presented with constant right-sided frontal headache that radiated to her cheek and jaw for one month. The patient had a past medical history of cervical cancer, myelofibrosis secondary to polycythemia vera, splenomegaly, and GERD. She had been receiving blood transfusions approximately every 3 weeks and had been hospitalized 3 weeks prior for urosepsis secondary to nephrolithiasis.

An MRI study on admission revealed 2 extra-axial posterior fossa lesions along the inferior cerebellar surfaces that showed variable post-contrast enhancement (left and center image). The left lesion measured 2.5 x 1.2 cm and showed evidence of perilesional edema by T2 (right image) and FLAIR images. The right lesion measured 1.1 x .05 cm. Susceptibility weighted images suggested hemosiderin deposition.

A surgical procedure was performed, which yielded the tissue submitted for study.

Material submitted:
MRI of brain and H&E stained section of left cerebellar lesion

Points for discussion:
1. Diagnosis
2. Etiology