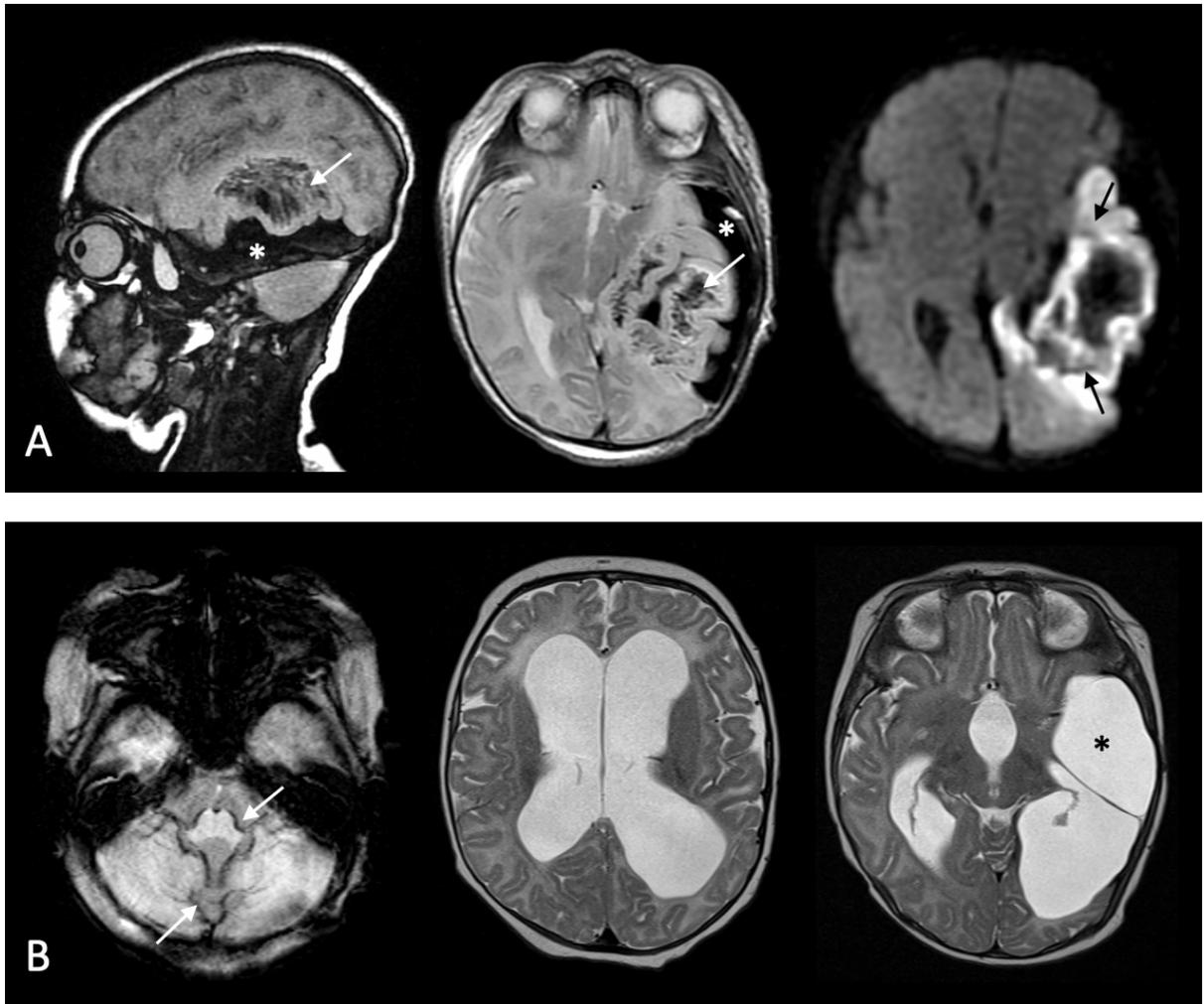


## Intracranial hemorrhage in term and late-preterm neonates: an institutional perspective

### Online Supplemental Material



**Figure S1.** Example of a large subpial hemorrhage and associated venous infarction. A. Infant born at 39 weeks with a prenatal diagnosis of congenital heart disease presented with seizures after normal spontaneous vaginal delivery. MRI obtained at 2 days of life showed large left subpial hemorrhage (\*) resulting in subjacent temporal lobe deformity and edema. Linear ropely intensities suggested combination of parenchymal hemorrhage and venous congestion/thromboses (white arrows). Associated left temporal lobe venous ischemia was also seen on diffusion MRI (black arrows). The infant underwent craniotomy for hemorrhage evacuation and was found to have venous thromboses and areas of venous laceration, which was subsequently cauterized. B. MRI obtained at 3 months of age shows ventriculomegaly from prior hemorrhage, as well as siderosis along the brain surface (arrows). Left temporal lobe volume loss and cavity (\*) is seen corresponding to prior site of injury and hemorrhage.