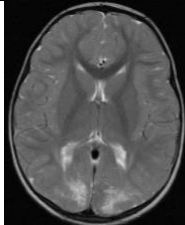
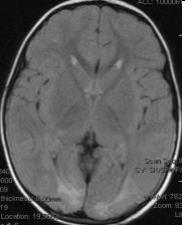
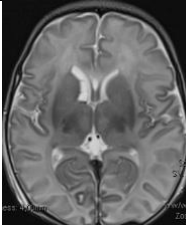
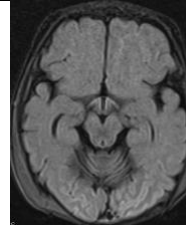
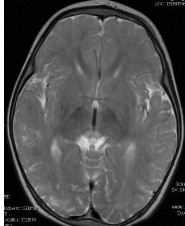
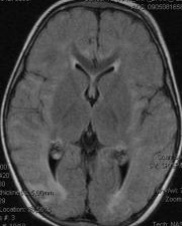
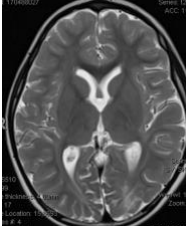
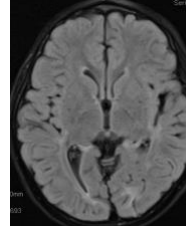
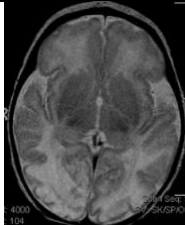
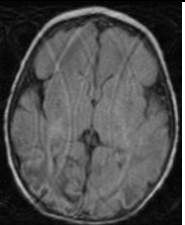
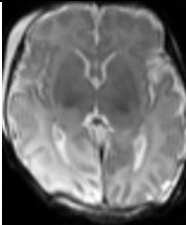
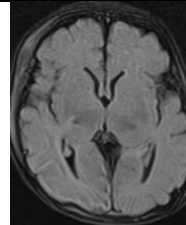
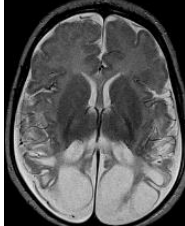
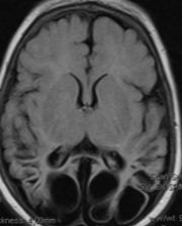
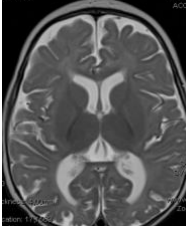
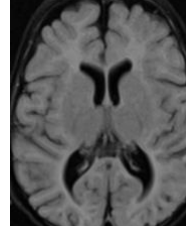
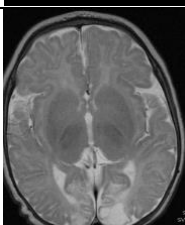
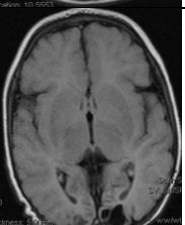
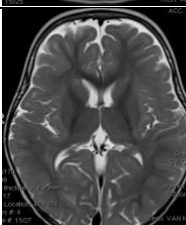
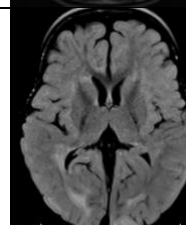
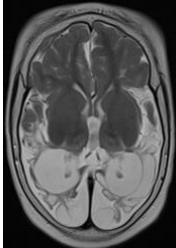
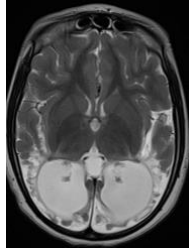
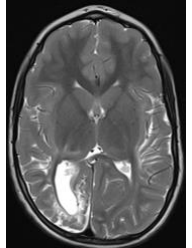
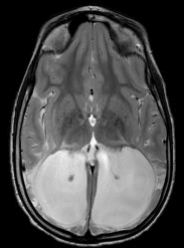
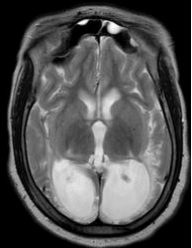
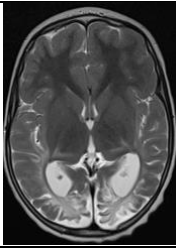
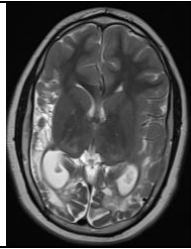
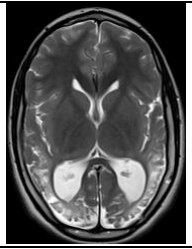
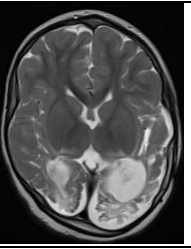
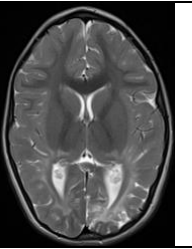


Supplementary Images

| Patient | T2  | FLAIR   | Patient | T2   | FLAIR   |
|---------|---|---|---------|--|---|
| A       |    |    | G       |    |    |
| B       |    |    | J       |    |    |
| C       |   |   | K       |   |   |
| D       |  |  | L       |  |  |
| E       |  |  | M       |  |  |
|         |   |   |         |  |   |

**Table A.** Axial T2-weighted and FLAIR sequence images of ten patients with documented pure neonatal hypoglycemic brain injury. Note the predominant parieto-occipital cortical injuries as well as distinct sparing of the thalami with absent thalamus L-sign.

| 1  | 2  | 3  | 4   | 5  |
|--|--|--|---|--|
|   |   |   |   |   |
|  |  |  |   |  |
| 6  | 7  | 8  | 9   | 10   |
|  |  |  |  |  |
|  |  |  |   |  |

**Table B.** The third group comprising patients with combined hypoxic-ischemic and hypoglycemic brain injury. Note the presence of the thalamus L-sign and the cortical watershed injuries.