A 38-year-old man presented to the emergency department with right-sided weakness, sensory loss, and hemianopsia. CT head showed a left hyperdense posterior cerebral artery sign (HPCAS) (figure 1). CT angiogram of the head confirmed a left posterior cerebral artery (PCA) occlusion (figure 2). MRI demonstrated a left PCA infarct. Transesophageal echocardiogram revealed an atrial septal aneurysm and patent foramen ovale. He was treated with antiplatelet therapy. The HPCAS has been considered a marker for acute ischemia in the PCA territory. Recognizing the HPCAS on CT in acute stroke may help in the diagnosis and treatment of thromboembolic PCA branch occlusion.

**AUTHOR CONTRIBUTIONS**

Dr. Dan Capampangan: study concept and design. Dr. Joyce Kerri Lee Ianotti: study concept and design. Dr. Katherine Colleen Riordan: acquisition of data. Dr. Christopher Lawrence Kramer: acquisition of data.
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REFERENCE