A 29-year-old woman experienced blurred vision, followed by a 15-minute left lateral hemianopsia. Three days later, a new episode of blurred vision occurred, but this time, it was followed by a 30-minute right lateral hemianopsia that was accompanied by vertigo, dizziness, and decreased sensation in her left hand. Cervical ultrasound examination was performed at the hospital. Probe passage on the right side of her neck was slightly painful. Between only two transverse processes (C4-C5), the right vertebral artery (segment V2) had an increased diameter and a pathognomonic sign of dissection, a double circulating lumen \((A, \text{B mode, and } B, \text{color mode, double arrows; Video, online only})\). This spontaneous localized extracranial right vertebral dissection was confirmed by computed tomographic angiography \((C, \text{arrow})\), which showed an intramural hematoma \((C, \text{arrow})\) where the vertebral artery passed through the foramen of the C5 transverse process \((C)\). The patient was given oral anticoagulants. She recovered completely and was symptom free at follow-up 2 months later.

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