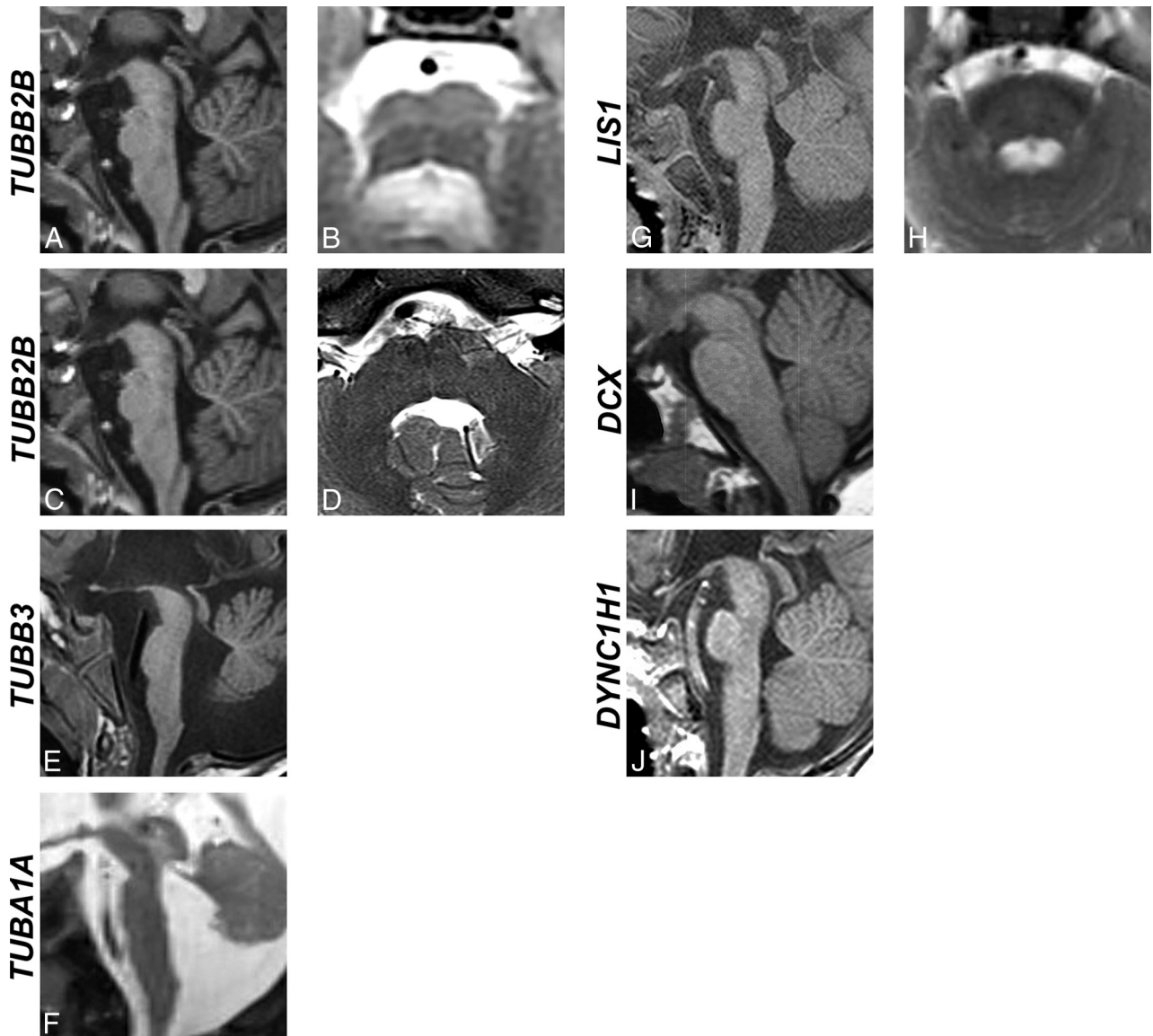
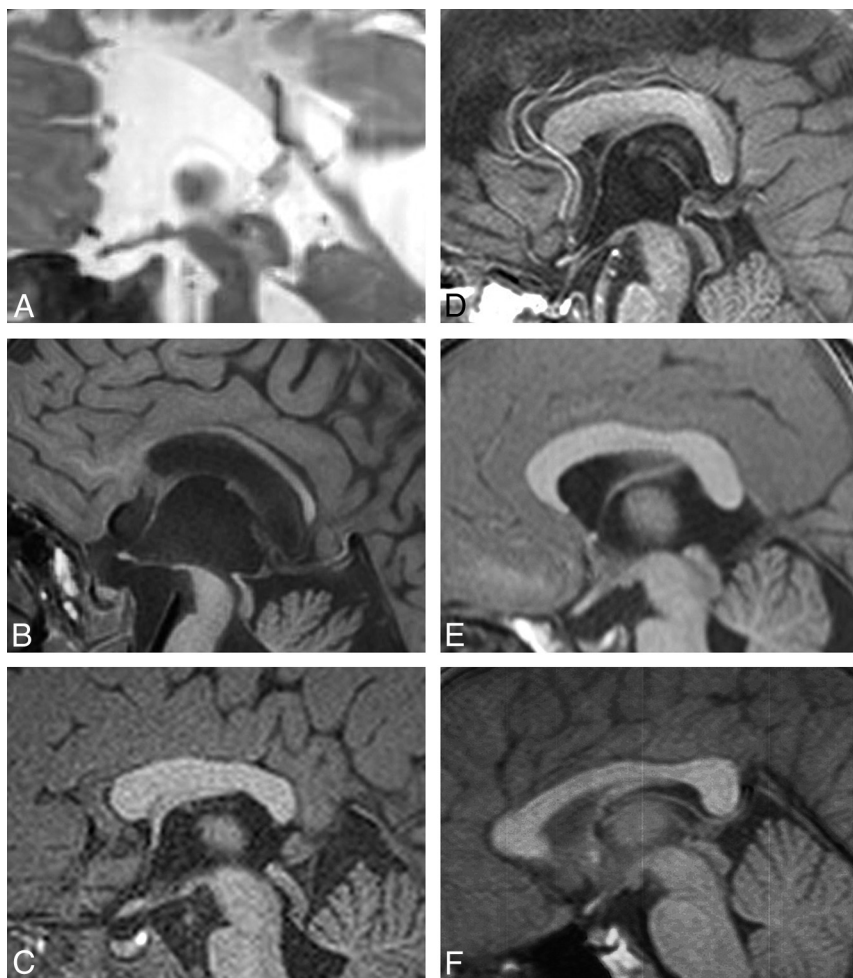


ON-LINE FIG 1. Coronal T1WI in 3-year-old patient with a *TUBA1A* mutation reveals an absent left olfactory sulcus with a relatively preserved right olfactory sulcus.



ON-LINE FIG 2. Midline sagittal T1WI (A, C, E, F, G, I, J) and axial T2WI through the pons (B, D, H) reveal different brain stem phenotypes. A patient with a *TUBB2B* mutation (A and B) has an asymmetric small pons with a central cleft and asymmetric, small middle cerebellar peduncles. Another patient with a *TUBB2B* mutation (C and D) also exhibits a small pons with a central cleft, though this one is more symmetric. A patient with a *TUBB3* mutation (E) demonstrates a diffusely thin pons and brain stem. A patient with a *TUBA1A* mutation (F) exhibits a disproportionately small brain stem, which is similar in anteroposterior diameter to the adjacent medulla. Overall, patients with MAP mutations have less severe brain stem (particularly pontine) findings. Sagittal (G) and axial (H) images from a patient with a *LIS1* mutation show a mildly thin pons. These findings can be contrasted with the normal brain stem (including a normal pons) in a patient with a *DCX* mutation (I). Finally, a patient with a *DYNC1H1* mutation (J) exhibits a small but distinct pons.



ON-LINE FIG 3. Midline sagittal T1WI (B–F) and T2WI (A) in patients with different tubulin and microtubule-associated protein gene mutations reveals different callosal phenotypes, including the following: an absent corpus callosum in a patient with a *TUBA1A* mutation (A); a very thin corpus callosum in a patient with a *TUBB3* mutation (B); a short, thick corpus callosum in a patient with a *TUBB2B* mutation (C); an L-shaped corpus callosum in a patient with a *DYNC1H1* mutation (D); a nearly normal corpus callosum in a patient with a *LIS1* mutation (E); and a normal corpus callosum in a patient with a *DCX* mutation (F).