



Steamboat Orthopaedic and
Spine Institute, 705 Marketplace
Plaza
Steamboat Springs, CO 80487
Phone# 970-879-6663/Fax#
970-871-1234

Patient:	BIRKINBINE, GRANT	Date:	November 15, 2023 11:33
DOB:	November 10, 1997	ID No:	379620OSS
		Acc No:	203827OSS

Examination: MR 73722^MRI HIP RIGHT W CONTRAST

Final Report

Referred By: 1281502664,

EXAMINATION: MRI RIGHT HIP WITH AND WITHOUT CONTRAST, 11/15/2023 11:33 AM

INDICATION: Chronic pain and swelling. Evaluate for PVNS.

TECHNIQUE: Pre-contrast coronal STIR, sagittal T1 and axial gradient echo; 3 plane post-contrast fat saturated T1. 14 mL Dotarem injected intravenously.

COMPARISON: 10/6/2023.

FINDINGS:

Bones/joints:

Edema in the medial femoral neck seen previously appears resolved. No periarticular bony edema, erosion or abnormal enhancement. Decreased offset of the lateral femoral head/neck transition is again noted. Areas of chondral labral separation and appear unchanged but are not completely evaluated with a limited exam done today. Chondral surfaces appear preserved. There is decreased joint effusion and synovitis. A globular focus in the inferomedial joint recess demonstrates some mild low signal blooming on the gradient echo, no convincing central enhancement and measures approximately 1.3 x 1.7 x 0.6 cm seen on coronal sequence 2 image 18 and axial images 14-15. No additional nodularity is evident. Ligamentum teres is intact. No pericapsular soft tissue edema or capsular tear.

Soft tissues:

Regional muscles and tendons appear unremarkable. No soft tissue fluid collection or area of abnormal enhancement. No inguinal adenopathy is evident.

IMPRESSION:

1. Since 10/6/2023, decreased joint effusion, synovitis and resolved medial femoral neck bone edema. However, there remains an approximately 1.3 x 1.7 x 0.6 cm low signal globular focus in the inferior medial joint recess that appears to have some mild low signal blooming on the gradient echo sequence suspicious for blood products in pigmented villonodular synovitis.
2. Unchanged appearance of lateral femoral head/neck transition, and morphology associated with cam-type femoroacetabular impingement.
3. Unchanged appearance of chondral labral separation where visualized, better evaluated on the prior exam.



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Thank you for the referral of this patient. This examination has been interpreted by a board certified radiologist with Diversified Radiology who is fellowship trained in Musculoskeletal Radiology. If there are any questions, please feel free to reach us at 303-446-3223.

SLOT 25

Electronically signed by: Trystain Johnson, M.D.
11/16/2023 11:51 AM

Impressions

Impression Text:	14cc DOTAREM
Entered By:	Buccino, Janelle (janelle)
On:	November 15, 2023 12:09:43
From:	MRI-CONTROL2-DT
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