

EXAM:;MRI LEFT KNEE WITHOUT

CONTRAST,CLINICAL:;This is a 53-year-old female with left

knee pain being evaluated for ACL tear.,FINDINGS:;This

examination was performed on 10-14-05.,Normal medial

meniscus without intrasubstance degeneration, surface

fraying or discrete meniscal tear.,There is a discoid lateral

meniscus and although there may be minimal superficial

fraying along the inner edge of the body, there is no discrete

tear (series #6 images #7-12).,There is a near-complete or

complete tear of the femoral attachment of the anterior

cruciate ligament. The ligament has a balled-up appearance

consistent with at least partial retraction of most of the fibers

of the ligament. There may be a few fibers still intact (series

#4 images #12-14; series #5 images #12-14). The tibial fibers

are normal.,Normal posterior cruciate ligament.,There is a

sprain of the medial collateral ligament, with mild separation

of the deep and superficial fibers at the femoral attachment

(series #7 images #6-12). There is no complete tear or

discontinuity and there is no meniscocapsular

separation.,There is a sprain of the lateral ligament complex

without focal tear or discontinuity of any of the intraarticular

components.,Normal iliotibial band.,Normal quadriceps and

patellar tendons.,There is contusion within the posterolateral

corner of the tibia. There is also contusion within the patella at

the midline patellar ridge where there is an area of focal

chondral flattening (series #8 images #10-13). The medial and

lateral patellar facets are otherwise normal as is the femoral

trochlea in the there is no patellar subluxation.,There is a mild

strain of the vastus medialis oblique muscle extending into the medial patellofemoral ligament and medial patellar retinaculum but there is no complete tear or discontinuity., Normal lateral patellar retinaculum. There is a joint effusion and plica., IMPRESSION:, Discoid lateral meniscus without a tear although there may be minimal superficial fraying along the inner edge of the body. Near-complete if not complete tear of the femoral attachment of the anterior cruciate ligament. Medial capsule sprain with associated strain of the vastus medialis oblique muscle. There is focal contusion within the patella at the midline patella ridge. Joint effusion and plica.