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Stand-up Mri of the Bronx, P.C.

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MULTI-POSITION MRI

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PETER NICAJ

N10005703-BI

Report Date: 02/11/2021

DOB:

07/07/1971

Exam Date:

02/09/2021

RICHARD SELDES, MD 95 UNIVERSITY PLACE 8TH FLR NEW YORK, NY 10003

MAGNETIC RESONANCE IMAGING OF THE LEFT ELBOW

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent 1.5T position.

HISTORY: Patient complains of pain in left elbow.

INTERPRETATION: Radiocapitellar and ulnotrochlear articulations are unremarkable. The proximal radioulnar joint is intact. There is a capsular effusion. The cubital tunnel is patent.

There is scarring of the anterior bundle of the medial collateral ligament, with a superimposed sprain. The flexor-pronator mass is preserved. The lateral collateral ligamentous complex is intact. The common extensor tendon is unremarkable. There is hypertrophic tendinosis at insertions of biceps and triceps tendons. The brachialis tendon insertion is preserved.

IMPRESSION:

- Scarring and sprain of anterior bundle of medial collateral ligament.
- Insertional tendinosis of biceps and triceps.

Sincerely,

David R. Payne, MD

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Diplomate of the American Board of Radiology with Added Qualifications in Neuroradiology DRP/cs