

3620 East Tremont Ave., Suite 104 Bronx, New York 10465

Patient Name:

WILLIAMS, JERMAINE

AGE: 042Y (M)

RDI#:

7288 JW

DOB: 01/27/1979

Study Date:

04/06/2021

Exam:

MRI LT ANKLE

Physician:

DR IMELDA CRUZ-BANTING

FINAL REPORT

HISTORY: 042Y status post injury with left ankle pain

PROTOCOL:

Sagittal and axial T1 weighted images as well sagittal, axial and STIR images were obtained

PRIORS: None.

The osseous structures demonstrate normal marrow signal characteristics with no evidence of cortical disruption.

Fluid is identified in the tendon sheath of the posterior tibialis tendon consistent with a sprain/tenosynovitis. No disruption or tear is identified. The flexor digitorum longus and flexor hallucis longus tendons are intact.

The peroneal tendons are intact and in normal retro malleolar position.

The visualized portion of the anterior tibialis tendon is intact.

Intrasubstance signal within the anterior portion of the Achilles tendon consistent with tendinosis/intrasubstance tear is identified. No disruption is identified.

The plantar fascia is intact.

The anterior and posterior talofibular ligaments are intact.

The deltoid ligament and interosseous talocalcaneal ligament is intact.

No abnormality within the sinus tarsi is identified.

There is an effusion within the posterior aspect of the tibiotalar joint as well as fluid in the middle subtalar joint

No abnormality in the medial neurovascular bundle is identified

IMPRESSION

Phone: 718.484.3989 / Fax: 718.484.8757



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FLUID IN THE TENDON SHEATH OF THE POSTERIOR TIBIALIS TENDON CONSISTENT WITH SPRAIN/TENOSYNOVITIS.

INTRASUBSTANCE SIGNAL IN THE DISTAL ACHILLES TENDON ANTERIORLY CONSISTENT WITH TENDINOSIS/INTRASUBSTANCE TEAR.

EFFUSION WITHIN THE POSTERIOR ASPECT OF THE TIBIOTALAR JOINT AS WELL AS FLUID IN THE MIDDLE SUBTALAR JOINT

Thank you for referring this patient to us for evaluation.

Very truly yours,

MICHAEL CARLIN MD

Electronically signed: 04/07/2021 15:47

103