

## STAND-UP MRI OF THE BRONX, P.C.

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MULTI-POSITION MRI

Accredited by the American College of Radiology

FRANCISCA ATTEMPA

N10104427-BI

**Report Date:** 06/07/2022

VILCHIS DOB:

10/04/1974

Exam Date:

06/06/2022

MARK KRAMER MD 1075 CENTRAL PARK AVE SUITE 307 SCARSDALE, NY 10583

## MRI OF THE RIGHT ANKLE WITHOUT CONTRAST

INDICATION: Patient complaining of right ankle pain with clicking swelling and difficulty walking.

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position on a high field 1.5T magnet.

COMPARISON: No prior studies were available for comparison at the time of dictation.

## FINDINGS:

No fracture. The ankle mortise is intact, without widening. The distal tibiofibular syndesmosis is intact. 6 x 4 mm stable osteochondral defect of the medial talar dome with subchondral bone edema. No coalition. The bone marrow signal is normal.

Achilles tendon is intact. Normal posterior tibial tendon. The flexor digitorum longus tendon is normal. Flexor hallucis longus tendon is normal. Extensor tendons are intact. Tenosynovitis of the peroneus brevis and longus tendons.

Sprain of the ATFL. The posterior talofibular ligament is intact. Deltoid ligament is intact. The syndesmotic ligaments are intact. Calcaneofibular ligament is intact.

Small tibiotalar joint effusion. No plantar fasciitis. Normal sinus Tarsi. No muscle edema. 2 cm ganglion cyst along the dorsal surface of the lateral cuneiform bone.

## IMPRESSION:

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Tenosynovitis of the peroneus brevis and longus tendons.

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Small tibiotalar joint effusion.

2 cm ganglion cyst along the dorsal surface of the lateral cuneiform bone.

Sincerely,

Priyesh Patel, MD ·

Certified, American Board of Radiology

Musculoskeletal and Spine Specialist

PP/ad