



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

Patient Name: MATOS, CLEMENTE
RDI #: 9763 CM
Study Date: 06/27/2022
Exam: MRI RT KNEE
Physician: DR IMELDA CRUZ-BANTING

AGE: 049Y (M)
DOB: 06/24/1973

FINAL REPORT

HISTORY: 049Y with right knee pain

PRIORS: none

PROTOCOL: Sagittal proton density and T2 weighted images and coronal T1 and STIR images were obtained. Additional axial fat suppressed T2 weighted images were obtained. Images were obtained on a high field MRI.

FINDINGS:

Cruciate Ligaments: Partial tear of the anterior cruciate ligament is identified. The posterior cruciate is intact.

Collateral Ligaments: The medial collateral ligament is intact. The lateral ligamentous complex is intact.

Menisci: There is a tear within the posterior horn of the medial meniscus as well as a tear of the posterior horn of the lateral meniscus.

Osseous Structures: Subtle osseous edema is identified within the superior aspect of the patella subjacent to the quadriceps tendon insertion. Avulsive injury along the insertion of the quadriceps is not excluded. The remainder of the osseous structures are intact.

Extensor Mechanism: Intrastance signal in the distal quadriceps tendon consistent with tendinosis/partial tear is suspected. The patellar tendon is intact as are the patellar retinacula.

Joint Effusion: There is a joint effusion present.

IMPRESSION

PARTIAL TEAR OF THE ANTERIOR CRUCIATE LIGAMENT.

TEAR WITHIN THE POSTERIOR HORN OF BOTH THE MEDIAL AND LATERAL MENISCI.

SUBTLE OSSEOUS EDEMA ALONG THE SUPERIOR ASPECT OF THE PATELLA SUBJACENT TO THE QUADRICEPS TENDON INSERTION WITH INTRASTANCE SIGNAL IN THE DISTAL QUADRICEPS TENDON. AVULSIVE INJURY TO THE PATELLA WITH TENDINOSIS/PARTIAL TEAR OF THE DISTAL QUADRICEPS TENDON IS SUSPECTED.