

STAND-UP MRI OF EAST ELMHURST, P.C.

Jackson Heights Shopping Center 75-33 31st Avenue • East Elmhurst, NY 11370 Phone: 718.779.2825 • Fax: 718.779.5349 Accredited by the American College of Radiology

Report Date:

08/05/2022

MULTI-POSITION MRI

ARTUR A JACHEC

N10112616-EE

DOB: 03/21/1997 Exam Date: 08/03/2022

NADEZHDA BABABEKOVA NP 440 AUDUBON AVENUE NEW YORK, NY 10040

MAGNETIC RESONANCE IMAGING OF THE LEFT WRIST

TECHNIQUE: Multiplanar, multisequential MRI was performed in the neutral sitting position.

HISTORY: Patient complains of left wrist pain with numbness and weakness status-post MVA 06/23/22.

INTERPRETATION: The examination was performed with the wrist in ulnar deviation and flexion.

There is ulnar negative variance. The distal radioulnar joint is intact. There is proximal distention of the distal radioulnar joint capsule. The radial attachment and body of the triangular fibrocartilage are preserved. There are sprains of distal attachments of the triangular fibrocartilage. The remainder of the triangular fibrocartilage complex is unremarkable.

Radiocarpal and ulnocarpal articulations are preserved. No significant marrow space signal intensity abnormality is seen in the proximal carpal row. Scapholunate and lunotriquetral interosseous intervals and ligaments are intact. There is no lunate tilt. Articulations between proximal and distal carpal rows are unremarkable. No significant marrow space signal intensity abnormality is seen in the distal carpal row. Intercarpal articulations are intact. First and common carpometacarpal joints are preserved. The carpal tunnel is patent, with intact contents. Dorsal extensor tendon compartments are preserved. There is a dorsal intercarpal ligament sprain.

IMPRESSION:

Distal attachment sprains of triangular fibrocartilage.

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• Dorsal intercarpal ligament sprain.

Thank you for referring your patient to us for evaluation.

Sincerely,

David R. Payne, MD

Diplomate of the American Board of Radiology with Added Qualifications in Neuroradiology

DRP/cs