

MRI OF THE LEFT KNEE WITHOUT CONTRAST

RE: EARL, GARY ROHAN
DOS: 03/17/2022
DOB: 11/10/1965
MRN: FC0011627

Referring Physician: Dr. Hilaire
Referring Physician Phone #: (347) 475-0078

CLINICAL INDICATION:

Left knee pain status-post work related accident.

TECHNIQUE:

MRI of the left knee utilizing multiple imaging sequences.

FINDINGS:

A knee effusion is not seen. A popliteal cyst is not demonstrated.

An oblique linear tear of the posterior horn of the medial meniscus is seen intersecting the inferior articular surface. No lateral meniscal tears are seen.

The anterior cruciate ligament is normal. There is thickening and abnormal signal mainly within the middle third and femoral third of the posterior cruciate ligament consistent with a sprain.

The patellar tendon and included quadriceps tendon demonstrate no evidence of a tear with Hoffa's and quadriceps fat pad normal.

The patella, patellar cartilage and patellar retinacula are normal.

No collateral ligament tears are seen. There is a small area of bone marrow edema/microtrabecular fracture involving the medial aspect of the medial femoral condyle. Signal from the muscular structures is normal.

IMPRESSION:

1. Oblique linear tear of the posterior horn of the medial meniscus intersecting the inferior articular surface.
2. Small area of bone marrow edema/microtrabecular fracture involving the medial aspect of the medial femoral condyle.

(Continued)



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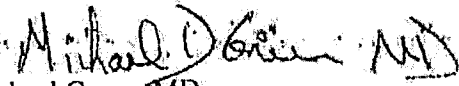
RE: EARL, GARY ROHAN
DOS: 03/17/2022
DOB: 11/10/1965
MRN: FC0011267

Referring Physician: Dr. Hilaire
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3. Thickening and abnormal intermediate signal within the mid and femoral portion of the posterior cruciate ligament most consistent with a sprain.

Thank you for the courtesy of this referral and we look forward to being of service to you in the future.


Michael Green, MD
MG/BV 03/22/2022

