

106-01 101st Ave., Ozone Park, NY 11416  
Tel: 718-850-0900 | Fax: 914-462-4764

<b>PATIENT:</b>	MILLER, NAJIYYAH	<b>EXAM DATE:</b>	07/18/2022 3:19 PM
<b>STUDY DESCRIPTION:</b>	MRI KNEE WITHOUT CONTRAST (JOINT)	<b>MRN:</b>	MILN70231
<b>DOB:</b>	02/10/1979	<b>REFERRING PHYSICIAN:</b>	Qureshi, Adnan
<b>CLINICAL HISTORY</b>	pain due to accident	<b>GENDER</b>	F

#### MAGNETIC RESONANCE IMAGING OF THE LEFT KNEE WITHOUT IV CONTRAST

**HISTORY:** Pain due to accident.

**TECHNIQUE:** Multiplanar, multi-sequence MRI of the left knee was performed without intravenous contrast.

**COMPARISON:** None available.

#### FINDINGS:

**OSSEOUS STRUCTURES/MARROW:** Mild bone marrow edema noted at the superior pole of patella.

#### LIGAMENTS:

**ANTERIOR CRUCIATE:** Anterior cruciate ligament sprain noted at the tibial attachment.

**POSTERIOR CRUCIATE:** The posterior cruciate ligament is intact.

**MEDIAL COLLATERAL LIGAMENT:** The medial collateral ligament is intact.

**LATERAL COLLATERAL LIGAMENT:** The lateral collateral ligament is intact.

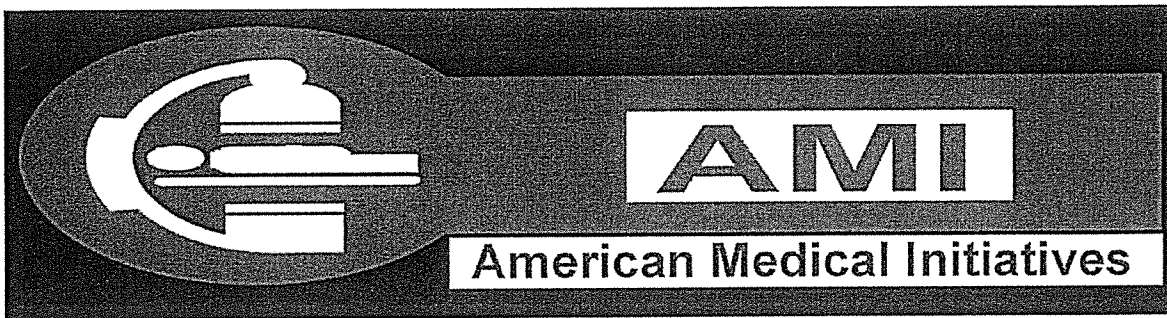
#### JOINT SPACES:

**MEDIAL COMPARTMENT:** Muroid degeneration seen in posterior horns of medial menisci extending in to body of menisci.

**LATERAL COMPARTMENT:** Muroid degeneration seen in posterior horns of lateral menisci extending in to body of menisci.

**PATELOFEMORAL COMPARTMENT:** Articular cartilage intact.

**SYNOVIUM/ JOINT FLUID:** There is a joint effusion.



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**MUSCLES:** No muscle edema or fatty muscle atrophy.

**NEUROVASCULAR STRUCTURES:** Normal in course and caliber.

**EXTENSOR MECHANISM:** The quadriceps tendon is intact. The patellar tendon is intact.

**PERIPHERAL SOFT TISSUES:** Normal.

**PLICAE:** No plicae demonstrated.

**IMPRESSION:**

1. Anterior cruciate ligament sprain at the tibial attachment.
2. Mild bone marrow edema at the superior pole of patella.
3. Muroid degeneration in posterior horns of medial menisci extending in to body of menisci.
4. Muroid degeneration in posterior horns of lateral menisci extending in to body of menisci.
5. Joint effusion.

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