

**STAND-UP MRI OF BENSONHURST, P.C.**

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MULTI-POSITION MRI

Accredited by the American College of Radiology

DENZEL MCCARDY
DOB: 08/23/1967
Exam Date: 06/12/2020

BK2001147 Report Date: 06/13/2020

AJOY SINHA, MD
1314 CONEY ISLAND AVE
BROOKLYN, NY 11230

MAGNETIC RESONANCE IMAGING SCAN OF THE LEFT KNEE

TECHNIQUE: 30 Degree Tilt: Sagittal T1, Sagittal T2, Gradient Echo Axial, Coronal T1, Coronal IR

HISTORY: Patient complains of left knee pain, swelling with slight difficulty walking. S/P Worker's comp accident

INTERPRETATION: There is lateral patellar subluxation and tilt.

There is distal quadriceps and distal patellar tendinosis/tendinopathy with a focal involvement.

Extending from the anterior tibiofemoral articular margins a thin septated presumptive ganglion cyst measuring 2.5 cm anteroposteriorly x 1.0 x 1.8 transverse and superoinferior dimensions with thin septations.

There is also a thin septated ganglion cyst tracking superiorly and inferiorly from the joint margin.

There is free edge truncation and radial tearing of the medial meniscal body.

Osseous signal and morphology are otherwise unremarkable. The lateral meniscus, the medial and lateral collateral ligaments, the anterior and posterior cruciate ligaments, quadriceps and patellar tendons are otherwise unremarkable.

IMPRESSION:

- Lateral patellar subluxation and tilt.
- Distal quadriceps and distal patellar tendinosis/tendinopathy with a focal involvement.

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Left knee MRI

- Extending from the anterior tibiofemoral articular margins a thin septated presumptive ganglion cyst measuring 2.5 cm anteroposteriorly x 1.0 x 1.8 transverse and superoinferior dimensions with thin septations.
- Thin septated ganglion cyst tracking superiorly and inferiorly from the joint margin.
- Free edge truncation and radial tearing of the medial meniscal body.

Thank you for referring your patient to us for evaluation.

Sincerely,



Steven Winter, M.D.

Diplomate of the American Board of Radiology

Fellowship Trained Musculoskeletal Radiologist

SW/jg