

# STAR MEDICAL IMAGING PC

141 E. Merrick Road Valley Stream, NY, 11580  
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<b>PATIENT NAME:</b>	<b>SHANNA CHERY</b>
<b>REFERRING PHYSICIAN:</b>	<b>ALEKSANDR KOPACH</b>
<b>SERVICE:</b>	<b>MRI RIGHT KNEE</b>
<b>DATE OF SERVICE:</b>	<b>05/15/2022</b>

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**MRI SCAN OF THE RIGHT KNEE**

**HISTORY:** History of MVA.

**TECHNIQUE:** Non-contrast MRI of the right knee was performed utilizing multiplanar and multisequence acquisition.

**FINDINGS:**

There is joint fluid compatible with synovitis. Soft tissue edema is present. There is no evidence of popliteal cyst formation or muscular tear. There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures.

The anterior and posterior cruciate ligaments as well as the medial and lateral collateral ligament complexes are intact.

The popliteal and quadriceps tendons and the patellar ligament are unremarkable. The patellar retinacula are intact.

A single coronal image demonstrates a linear hyperintense signal extending to the inferior articular surface of the posteromedial meniscal horn. Since the finding is only seen on a single image, this is consistent with a Grade 2B signal (from the literature, 50% are positive for tears) and compatible with a posteromedial meniscal tear.

The medial and lateral meniscal structures are otherwise intact. No other meniscal tears are suspected.

**IMPRESSION:**

**Presence of joint fluid compatible with synovitis and soft tissue edema.**

**Posteromedial meniscal tear as discussed in the body of the report.**

**The anterior and posterior cruciate ligaments as well as the medial and lateral collateral ligament complexes are intact.**

**No acute osseous abnormalities.**

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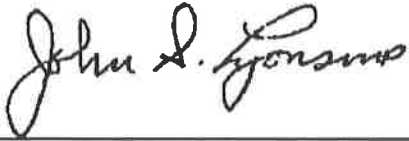
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Thank you for the courtesy of this consultation.



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John Lyons, M.D.

Radiologist