

STAR MEDICAL IMAGING PC

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PATIENT NAME:	ESE EWEKE
REFERRING PHYSICIAN:	ALEKSANDR KOPACH
SERVICE:	MRI RIGHT WRIST
DATE OF SERVICE:	05/12/2022

MRI SCAN OF THE RIGHT WRIST

HISTORY: History of MVA.

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

FINDINGS:

The visualized osseous structures are intact. There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures.

There is increased signal in the midportion of the TFC disk proper. In the given clinical setting, the finding is compatible with a partial tear. The triangular fibrocartilage complex is otherwise intact. Fluid is present in the pre-styloid recess, radiocarpal joint, and distal radio-ulnar joint compatible with synovitis. There is no communication of these fluid collections across the TFCC.

The carpal tunnel and median nerve are unremarkable. The flexor retinaculum bowing ratio of approximately 0.07 is within normal limits (from the literature, upper limits of normal = 0.15). Therefore, there is no evidence of carpal tunnel syndrome.

The visualized ligamentous and tendinous structures are otherwise intact. The muscle, fat, and fascial planes are well maintained.

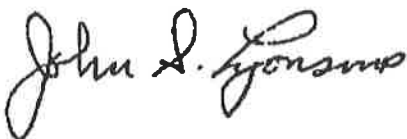
IMPRESSION:

Findings compatible with partial tear involving the TFC as discussed in the body of the report.

Fluid in the pre-styloid recess, radiocarpal joint, and distal radio-ulnar joint compatible with synovitis.

No acute osseous abnormalities.

Thank you for the courtesy of this consultation.



John Lyons, M.D.

Radiologist