

New York Medical & Diagnostic Care P.C.
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PATIENT NAME: Pelissier, Jacques S JR
DATE OF BIRTH: 12/06/79
REFERRING PHYSICIAN: Dr. Stanley Kim
DATE OF EXAM: 7/18/22

MRI OF THE RIGHT KNEE:

TECHNIQUE: Sagittal, axial and coronal images of the right knee were performed using spin-echo and gradient echo pulse sequences.

CLINICAL HISTORY: Pain.

FINDINGS: Marrow signal is unremarkable. The distal femur and proximal tibia are intact. There is no osteonecrosis or fracture.

There is a joint effusion noted. Superficial varicose veins are noted.

There is quadriceps and patellar tendinosis/tendonitis. There is no chondromalacia or mass in the posterior compartment.

The anterior and posterior cruciate ligaments are intact. The PCL is intact. There is a Grade I-II LCL sprain. The MCL complex is intact. There is tearing of the medial meniscus. The lateral meniscus is intact without evidence of tearing or morphology. There is a large cystic structure medially may represent a meniscal, ganglion or synovial cyst.

IMPRESSION:

1. Joint effusion.
2. Grade I-II LCL sprain.
3. ~~Tearing medial meniscus.~~
4. Large cystic structure medially may represent a meniscal, ganglion or synovial cyst.
5. Quadriceps and patellar tendinosis/tendonitis.

Thank you for the courtesy of this consultation.



Robert D. Solomon, M.D.
Board Certified Radiologist

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