



## Community Medical Imaging

ACR Accredited Facility  
159-16 Union Tpke • Fresh Meadows, NY 11366  
Tel: 718-275-1010 • Fax: 718-591-3300

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AJOY K. SINHA, M.D.  
79-09 B NORTHERN BLVD  
JACKSON HEIGHTS, NY 11372

PATIENT: VICENTE FELIPE PITA GUALLI  
DOB: 11/29/1986  
DOS: 05/25/2022  
CHART #: 25126  
EXAM: MRI OF THE LEFT KNEE WITHOUT CONTRAST

HISTORY: Anterior pain.

TECHNIQUE: Multiplanar MR imaging of the left knee was performed without contrast on Hitachi open MRI unit.

Coronal PD, T2 and STIR; Sagittal PD and PD fat suppressed; axial T2 and T2 fat suppressed of the knee were obtained.

COMPARISON: None.

Additional sanitizing / safety protocols recommended by the CDC were performed.

FINDINGS: The patellofemoral compartment is unremarkable.

There is no chondromalacia. There is no tracking abnormality.

The medial and lateral retinacula are unremarkable.

The quadriceps and patellar tendons are intact.

There is moderate contusion over the proximal patellar tendon.

Small joint effusion is seen without evidence of loose body.

There is a grade I injury of the medial collateral ligament. There is no fracture. There is no bone bruise. There is no osteochondral defect.

There is slight disorganization of the fibers distally at the ACL. There is no attenuation or laxity. There is myxoid signal seen at the medial meniscus. There is no meniscal tear.

There is no muscular injury. There is no Baker's cyst.



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**IMPRESSION:**

1. A FOCAL INTERSTITIAL TEAR OF THE DISTAL ACL IS NOTED. THERE IS NO ATTENUATION OR LAXITY.
2. THERE IS A GRADE I INJURY OF THE MEDIAL COLLATERAL LIGAMENT.
3. MINIMAL JOINT FLUID IS SEEN, WHICH APPEARS TO BE PHYSIOLOGIC.

Thank you for referring this patient to us.

Andrew McDonnell, MD  
Neuroradiologist  
Diplomate, American Board of Radiology  
AM/man/pr D: 05/25/2022

E-Sig By A. McDonnell, MD on 05/26/2022 06:50:28