



HIGHLINE
RADIOLOGY

Highline Radiology

138-21 Queens Blvd.

Briarwood, NY 11435

Tel: 718-480-1250 Fax: 718-480-6720

To: Davis, Gordon
Exam: MRI LEFT KNEE
Exam Date: 06/16/2022 2:05 PM
Accession: 26809

Patient Name: Smith, Floyd
DOB: 03/09/1968
Gender: M
MRN: SmiF5781

LEFT KNEE MRI WITHOUT CONTRAST

HISTORY: Left knee pain status post motor vehicle accident

TECHNIQUE: Multiplanar, multi-sequence MRI of the left knee was obtained without intravenous contrast.

COMPARISON: None available.

FINDINGS:

LIGAMENTS: The cruciate and collateral ligaments are intact.

MEDIAL COMPARTMENT: Intact medial meniscus and articular cartilage.

LATERAL COMPARTMENT: There is a complex tear of the anterior horn and anterior horn/body junction of lateral meniscus. There is deep chondral fissuring with subchondral cystic change at the central lateral tibial plateau.

PATELLOFEMORAL COMPARTMENT: There are broad regions of full-thickness chondral loss on both sides of the patellofemoral compartment with marginal osteophytes.

MARROW: Normal marrow signal.

SYNOVIUM/ JOINT FLUID: There is a large joint effusion. There is a moderate sized popliteal cyst.

MUSCLES: No muscle edema or fatty muscle atrophy.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

EXTENSOR MECHANISM: The patellar tendon is intact. There is insertional quadriceps tendinitis.

PERIPHERAL SOFT TISSUES: There is soft tissue edema about the anterior knee.

IMPRESSION:

Complex tear of the anterior horn and anterior horn/body junction of lateral meniscus.

Focal deep chondral fissuring at the central lateral tibial plateau.



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Severe patellofemoral compartment arthrosis.

Large joint effusion with a moderate sized popliteal cyst.

Insertional quadriceps tendinitis. Soft tissue edema about the anterior knee.

Electronically Signed by: Borukhov, David MD on 06/17/2022 11:51 AM