



MULTI-POSITION MRI

STAND-UP MRI OF BENSONHURST, P.C.

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Accredited by the American College of Radiology

STELLA TEVOEDJRE
 DOB: 07/05/1967
 Exam Date: 07/18/2022

N10110663-BE Report Date: 07/18/2022

AJOY SINHA MD
 357 BROADWAY
 AMITYVILLE, NY 11701

**MAGNETIC RESONANCE IMAGING OF THE HIPS
 WITH ATTENTION TO THE RIGHT HIP**

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position.

HISTORY: The patient complains of right hip pain, difficulty walking, rule out internal derangement.

INTERPRETATION: There is subcortical cystic and reactive change involving the anterior acetabular margin also the superomedial acetabular margin with thinning of the overlying cortical chondral surface with likely chondral surface fissuring.

There is inhomogeneity at the site of attachment of the gluteus medius tendon on the greater trochanter representing insertional tendinosis/tendinopathy.

There is multifibroid uterus which is enlarged and lobulated. The largest myoma measuring nearly 4 cm. Clinical assessment advised and gyn consultation recommended if not diagnosed previously.

There is clarity reduction related to a combination of patient motion and the patient's body habitus and the best obtainable study was performed as discussed above.

The alignment of the hip joint is otherwise satisfactory. The bone marrow signal of the femoral head and acetabulum as well as the visualized surrounding structures of the hemipelvis are unremarkable without infiltration or edema. There are no other findings to indicate ischemic necrosis. The tendinous and muscular structures surrounding the hip joints are otherwise unremarkable and are without any focal masses or signal alteration. There is no evidence of a labral tear. There are no other collections of fluid surrounding the hip to indicate bursitis. There is no other significant joint effusion.

STELLA TEVOEDJRE

N10110663

Exam Date:

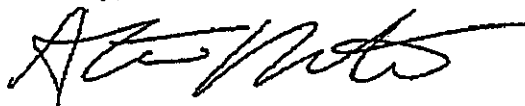
07/18/2022

Page 2 of 2
HIP RIGHT MRI 73721**IMPRESSION:**

- Subcortical cystic and reactive change involving the anterior acetabular margin also the superomedial acetabular margin with thinning of the overlying cortical chondral surface with likely chondral surface fissuring.
- Inhomogeneity at the site of attachment of the gluteus medius tendon on the greater trochanter representing insertional tendinosis/tendinopathy.
- Multifibroid uterus which is enlarged and lobulated. The largest myoma measuring nearly 4 cm. Clinical assessment advised and gyn consultation recommended if not diagnosed previously.
- There is clarity reduction related to a combination of patient motion and the patient's body habitus and the best obtainable study was performed as discussed above.

Thank you for referring your patient to us for evaluation.

Sincerely,



Steven Winter, M.D.

Diplomate of the American Board of Radiology

Fellowship Trained in Musculoskeletal Radiology

SW/BC