



Westchester Radiology & Imaging, PC

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PATIENT: MILLER TAYLOR
DOB: 06/07/1994
PHYSICIAN: DR. FITZGERALD
EXAM DATE: 04/28/2022

MRI OF THE RIGHT KNEE

INDICATION: Pain.

TECHNIQUE: Multiple T1 and T2 weighted MRI images of the right knee were obtained in the axial, sagittal and coronal planes without intravenous contrast.

FINDINGS: Motion artifact significantly diminishes sensitivity of this examination. There are no acute fractures, dislocations, destructive bony lesions or marrow infiltration in the distal femur, proximal tibia, fibula and the patella. The patellar retinacula are intact. The distal quadriceps tendon, the patellar tendon, the lateral collateral, the fibular collateral ligaments and the iliotibial band are intact. The ACL and the PCL are intact. The lateral meniscus is intact. There are no masses or fluid collections. The adjacent musculature is intact without strains, edema, atrophy or fatty infiltration.

There is horizontal tear in the posterior horn of the medial meniscus. There is grade 1 sprain of the proximal medial collateral ligament, consistent with recent trauma, in an appropriate clinical setting. Mild joint effusion consistent with recent trauma, in an appropriate clinical setting.

IMPRESSION:

1. Horizontal tear in the posterior horn of the medial meniscus.
2. Grade 1 sprain of the proximal medial collateral ligament, consistent with recent trauma, in an appropriate clinical setting.
3. Mild joint effusion consistent with recent trauma, in an appropriate clinical setting.

Steve B. Losik M.D.

Steve B. Losik, M.D.
Board Certified Radiologist
Electronically Signed