



MULTI-POSITION MRI

STAND-UP MRI OF THE BRONX, P.C.

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Accredited by the American College of Radiology

JOHN HOPSON

DOB: 09/02/1965

Exam Date: 03/21/2022

N10016332-BI

Report Date: 03/24/2022

MELLITA SHAKHMUROV PA
2426 EASTCHESTER RD
BRONX, NY 10461

MRI OF THE LEFT KNEE WITHOUT CONTRAST

TECHNIQUE: Multiplanar, multisequential MRI was performed in the 30 degree tilt position.

INDICATION: The patient complains of left knee pain.

COMPARISON: No prior studies were available for comparison at the time of dictation.

FINDINGS:

Complex tear at the junction of the body and posterior horn of medial meniscus with an adjacent 1 cm meniscal cyst. Sprain of the MCL. Mild patellar subluxation and tilt. High-grade patellofemoral cartilage loss. Small joint effusion. Edema anterior to the patellar tendon.

No fracture. Bone marrow signal is normal.

Lateral meniscus is intact. No meniscocapsular separation. No meniscal cyst.

ACL is intact. PCL is intact. Lateral (fibular) collateral ligament is intact. Conjoined tendon is intact. Popliteus tendon is normal.

Patellar tendon is intact. Quadriceps tendon is intact. Patellofemoral ligaments are intact.

No popliteal cyst. No intra-articular loose body. Visualized muscle signal is normal.

IMPRESSION:

1. Complex tear at the junction of the body and posterior horn of medial meniscus with an adjacent 1 cm meniscal cyst.
2. Sprain of the MCL.
3. Mild patellar subluxation and tilt. High-grade patellofemoral cartilage loss.
4. Small joint effusion. Edema anterior to the patellar tendon.

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Sincerely,

A handwritten signature in black ink, appearing to read 'Priyesh Patel', with a stylized flourish at the end.

Priyesh Patel, MD
Certified, American Board of Radiology
Musculoskeletal and Spine Specialist
PP/ad