

**MULTI-POSITION MRI****STAND-UP MRI OF CARLE PLACE, P.C.**

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Accredited by the American College of Radiology

LAUREN LOPEZ**N10097661-CP****Report Date: 06/25/2022****DOB:** 03/01/1974**Exam Date:** 06/24/2022**PHYLLIS GELB****430 WEST MERRICK ROAD****VALLEY STREAM, NY 11580****MAGNETIC RESONANCE IMAGING OF THE LEFT HAND**

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

HISTORY: The patient complains of left hand pain, MVA.

INTERPRETATION: There is prominent fluid distension of the fourth flexor tendon sheath extending from the mid metacarpal level through the proximal to mid proximal phalangeal level, compatible with fourth flexor tenosynovitis. There is some edema in the adjacent volar subcutaneous tissues anterior to the fourth flexor tendon at the metacarpal level.

There is increased T1 signal involving the first and second flexor tendons at the metacarpal level, more prominently involving the second flexor tendons, representing tendinosis/tendinopathy.

There is considerable technical limitation on this examination due to a combination of diffuse flexion of the hand at all articulations and the inability patient remaining still throughout the examination. The patient was not willing to repeat any of the motion degraded images as she wanted to complete the examination as soon as possible and therefore limited examination is completed and there are findings that may escape detection due to the loss of clarity and detail on the examination. The best obtainable study was completed in this respect and as per the patient's wishes.

No other focal areas of abnormal osseous signal or morphology are noted. The visualized portions of the extensor tendons as well as the medial and lateral collateral ligaments otherwise appear to remain intact. No soft tissue masses or altered signals or infiltrations are otherwise identified.

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HAND LEFT MRI 73218**IMPRESSION:**

- Prominent fluid distension of the fourth flexor tendon sheath extending from the mid metacarpal level through the proximal to mid proximal phalangeal level, compatible with fourth flexor tenosynovitis. There is some edema in the adjacent volar subcutaneous tissues anterior to the fourth flexor tendon at the metacarpal level.
- Increased T1 signal involving the first and second flexor tendons at the metacarpal level, more prominently involving the second flexor tendons, representing tendinosis/tendinopathy.
- There is limitation on the examination due to a combination of suboptimal positioning and considerable motion-related artifact. The study was completed as per the patient's limits and as per the patient's wishes. Please see above discussion. We would be happy to repeat the study if the patient is able to cooperate for motion-free images.

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