

## Community Medical Imaging

ACR Accredited Facility
159-16 Union Tpke • Fresh Mendows, NY 11366
Tel: 718-275-1010 • Fax: 718-591-3300

AJOY K. SINHA, M.D. 79-09 B NORTHERN BLVD JACKSON HEIGHTS, NY 11372

PATIENT: CESAR BORRAYO

DOB: 06/12/1964 DOS: 05/11/2022 CHART #: 24876

EXAM: MRI OF THE RIGHT KNEE WITHOUT CONTRAST

HISTORY: Lateral pain, difficulty walking.

COMPARISON: None.

Additional sanitizing / safety protocols recommended by the CDC were performed.

TECHNIQUE: Multiplanar MR imaging of the right knee was performed without contrast on Hitachi open MRI unit.

Coronal PD, T2 and STIR; Sagittal PD and PD fat suppressed; axial T2 and T2 fat suppressed of the knee were obtained.

FINDINGS: There is a mild lateral patellar tilt. There is no chondromalacia.

Patellar tendon is intact. Distal quadriceps tendon is unremarkable. There is a focal contusion over the mid patellar tendon.

Medial and lateral collateral ligaments are unremarkable.

There is no fracture. There is no bone bruise. There is no osteochondral defect.

PCL is intact. There is diffuse disorganization of the fibers of the ACL. There is no laxity. The findings are greater distally, best seen on images #9 and #10 of series #5.

The lateral meniscus is intact. There is no attenuation. At the medial meniscus, a complex horizontal tear is seen exiting inferiorly from the mid body to the posterior horn. The tear is more prominent at the mid body. There is a parameniscal cyst posteriorly measuring 4 x 5 cm seen on image #6 of series #3.

There is no muscular injury. There is no Baker's cyst.



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PAGE 2

Medial and lateral retinacula appear unremarkable. Gastrocnemius is unremarkable.

## IMPRESSION:

1. A HORIZONTAL COMPLEX TEAR OF THE MEDIAL MENISCUS IS SEEN FROM THE MID BODY TO THE POSTERIOR HORN. THE TEAR IS MORE PROMINENT AT THE POSTERIOR BODY. AN ADJACENT PARAMENISCAL CYST AND REACTIVE CHANGES ARE SEEN. THERE IS SLIGHT IRREGULARITY OF THE CORTEX POSTERIORLY AT THE MEDIAL TIBIAL PLATEAU ON IMAGE #8 OF SERIES #4 SUGGESTING A FRACTURE. THERE IS NO CURRENT EDEMA.

2. THERE IS AN INTERSTITIAL TEAR OF THE ACL SEEN PROMINENTLY. THERE IS NO ATTENUATION.

3. THERE IS A CONTUSION OVER THE MID PATELLAR TENDON.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 05/11/2022

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E-Sig By A. McDonnell, MD on 05/12/2022 06:49:14