

SKY RADIOLOGY

PATIENT NAME GUERRIER, YOLETTE
D.O.B. 02/05/1957
PATIENT # 433
DATE OF SERVICE 6/16/2022 3:01:39 PM
REF. PHYSICIAN RAHMAN, QUAZI MD

MRI OF THE RIGHT KNEE WITHOUT CONTRAST

INDICATION: MVA. Right knee pain

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

TECHNIQUE: T1, T2, and PD axial, coronal, and sagittal sequences without intravenous contrast.

FINDINGS:

Osseous structures and cartilage:

- No evidence of fracture or suspicious lesions. Tricompartmental osteophytic changes with joint space narrowing and a subcentimeter central tibial subcortical appearing cyst.

-Mild to moderate anterior femoral tibial chondral loss. No evidence of osteochondral injury.

Menisci: Medial and lateral menisci are intact with overall normal signal and morphology. No meniscocapsular separation. No meniscal cyst.

Anterior cruciate ligament: Degeneration otherwise grossly intactd

Posterior cruciate ligament: Intact

Mediocolateral ligament: Normal

The lateral collateral ligament/posterolateral corner complex: Iliotibial band, lateral (fibular) collateral ligament, biceps femoris, and conjoined tendons intact. Popliteus tendon and muscle are normal. Remaining visualized posterolateral corner structures are without significant abnormality.

Quadriceps and patellar tendons: Intact. No patellar tilt or subluxation. Patellofemoral ligaments are intact.

Joint spaces: Anatomically aligned. No loose bodies. No significant effusion.

SKY RADIOLOGY P.C.

210-12 NORTHERN BLVD, BAYSIDE, NY 11361 * TEL 718-224-8800 * FAX 718-224-8822

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Extra articular soft tissues: Visualized muscle signal is normal. Approximately 14.5 x 16.9 x 48.0 mm thin, lobulated dissecting Baker's cyst.

IMPRESSION:

1. Tricompartmental osteoarthritis as described above.
2. Approximately 14.5 x 16.9 x 48.0 mm thin, lobulated dissecting Baker's cyst.

Thank you for this kind referral of this patient.

B.V. Reddy MD

B.V. Reddy M.D.
Diagnostic Radiologist and Nuclear Medicine Physician
Diplomat of ABNM and ABR
MRI and Breast Imaging Specialist

Electronically Signed by REDDY, B.V. MD DR. at 6/22/2022 11:34:45 PM