QUEENS RADIOLOGY IMAGING PC
DIAGNOSTIC RADIOLOGY

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PATIENT:	REID,MICHELLE	**EXAM DATE:**	06/29/2022 11:52 AM
STUDY DESCRIPTION:	MRI KNEE WITHOUT CONTRAST (JOINT)	**MRN:**	REIM70698
DOB:	11/04/1970	**REFERRING PHYSICIAN:**	Jurkowich, Michael
CLINICAL HISTORY:	PAIN IN RT. KNEE AFTER MVA	**GENDER:**	F

Magnetic resonance imaging of the right knee without IV contrast

Clinical history: Pain at the time of MVA

Comparison: None

Description
An MRI of the right knee was performed using multiplanar, multiecho pulse sequence. No IV contrast was given.

Osseous structures/marrow: There is no bony fractures or dislocation. There is no evidence of osteonecrosis

Ligaments

Anterior cruciate ligament: There is increased T2 signal on the proton density sequence adjacent to the ACL indicating sprain. No definite tears
Posterior cruciate ligament: Posterior crucial ligament intact
Medial collateral ligament: Medial collateral ligament intact
Lateral collateral ligament: Lateral collateral ligament intact

Joint

Medial compartment: Horizontal tear extending to the inferior articular surface at the posterior horn. Cartilage is intact
Lateral compartment: Oblique tear extending to the inferior articular surface in the posterior horn.

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Cartilage is intact
Patellofemoral: There is cartilage erosion at the apex of the patella.

Extensor mechanism: There is increased signal seen at the quadriceps insertion at the patella indicating tendinopathy. There is edema adjacent to the patella representing paratenonitis
Muscles: No muscle edema or fatty atrophy
Neurovascular bundle: Normal course and caliber
Plica: None present
Soft tissues: Prepatellar edema present

Impression
1. Increased T2 signal on the proton density sequence adjacent to the ACL indicating sprain. No definite tears
2. Horizontal tear extending to the inferior articular surface at the posterior horn of the medial meniscus. Oblique tear extending to the inferior articular surface in the posterior horn of the lateral meniscus
3. Patella cartilage erosion
4. Increased signal seen at the quadriceps insertion at the patella indicating tendinopathy. There is edema adjacent to the patella representing paratenonitis

Digitally Signed By: Izzo, Joseph
Digitally Signed Date: 07/02/2022 4:42 PM