



| | | | |
|------------|--------------------|---------------|----------------|
| To: | Davis, Gordon | Patient Name: | Perez, Dolores |
| Exam: | MRI LEFT KNEE | DOB: | 10/29/1976 |
| Exam Date: | 07/21/2022 3:06 PM | Gender: | F |
| Accession: | 28345 | MRN: | PerD6111 |

LEFT KNEE MRI WITHOUT CONTRAST

HISTORY: Left knee pain status post motor vehicle accident

TECHNIQUE: Multiplanar, multi-sequence MRI of the left knee was obtained without intravenous contrast.

COMPARISON: None available.

FINDINGS:

LIGAMENTS: There is hyperintense PD signal about the anterior cruciate ligament consistent with sprain sequelae. The posterior cruciate ligament is intact. The collateral ligaments are preserved.

MEDIAL COMPARTMENT: There is edema within the posterior medial meniscocapsular junction consistent with meniscocapsular junction sprain. Intact articular cartilage.

LATERAL COMPARTMENT: Intact lateral meniscus and articular cartilage.

PATELLOFEMORAL COMPARTMENT: Intact articular cartilage.

MARROW: There is a 1.9 cm chondroid lesion with nonaggressive features within the proximal tibia consistent with an enchondroma.

SYNOVIUM/ JOINT FLUID: There is a joint effusion. There is fluid within the semimembranosus medial collateral ligament bursa consistent with bursitis.

MUSCLES: No muscle edema or fatty muscle atrophy.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

EXTENSOR MECHANISM: The quadriceps tendon is intact. The patella tendon is preserved.

PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

Anterior cruciate ligament sprain. Posterior medial meniscocapsular junction sprain.



HIGHLINE
RADIOLOGY

Highline Radiology

138-21 Queens Blvd.

Briarwood, NY 11435

Tel: 718-480-1250 Fax: 718-480-6720

To: Davis, Gordon

Exam: MRI LEFT KNEE

Exam Date: 07/21/2022 3:06 PM

Accession: 28345

Patient Name: Perez, Dolores

DOB: 10/29/1976

Gender: F

MRN: PerD6111

Joint effusion. Semimembranosus medial collateral ligament bursitis.

A 1.9 cm chondroid lesion with nonaggressive features within the proximal tibia consistent with enchondroma.

Electronically Signed by: Borukhov, David MD on 07/21/2022 4:55 PM