



MULTI-POSITION MRI

STAND-UP MRI OF MANHATTAN, P.C.

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CARLOS SANCHEZ

**N10021856-
ME**

Report Date: 03/17/2022

DOB: 12/23/1962

Exam Date: 03/16/2022

**TRISHANNA YANKANNAH PA
14 BRUCKNER BLVD
BRONX, NY 10454**

MAGNETIC RESONANCE IMAGING SCAN OF THE LEFT KNEE

TECHNIQUE: Multiplanar, multisequential MRI was performed in the 13-degree tilt position.

HISTORY: The patient complains of knee pain with difficulty walking and clicking sound.

COMPARISON: Previous 12/18/2020 report.

FINDINGS: The medial and lateral menisci remain intact.

The ACL, PCL, MCL, and LCL are intact.

The ITB, biceps femoris, and popliteus are intact. There is local edema deep to the ITB which can be seen with ITB friction syndrome.

Intact gastrocnemius tendon origins.

Findings compatible with an Osgood-Schlatter with insertional tendinosis of the patellar tendon and fragmentation of the anterior tibial tuberosity.

Mild quadriceps tendinosis.

No acute fracture. No OCD lesion.

Small knee effusion.

No medial popliteal cyst.

Anterior soft tissue swelling.

No full-thickness chondral defect.

IMPRESSION:

- Local edema deep to the ITB which can be seen with ITB friction syndrome.
- Findings compatible with an Osgood-Schlatter with insertional tendinosis of the patellar tendon and fragmentation of the anterior tibial tuberosity.
- Mild quadriceps tendinosis.
- Small knee effusion.
- Anterior soft tissue swelling.

Thank you for referring your patient to us for evaluation.

Sincerely,



Christian P. Annese M.D.
Diplomate of the American Board of Radiology
Fellowship Trained in Musculoskeletal Radiology
CPA/RM

