

New York Medical & Diagnostic Care P.C.

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PATIENT NAME: Pelissier, Jacques S JR

DATE OF BIRTH: 12/06/79

REFERRING PHYSICIAN: Dr. Stanley Kim

DATE OF EXAM: 7/18/22

MRI OF THE LEFT KNEE:

TECHNIQUE: Sagittal, axial and coronal images of the left knee were performed using spin-echo and gradient echo pulse sequences.

CLINICAL HISTORY: Pain.

FINDINGS: Marrow signal is unremarkable. The distal femur and proximal tibia are intact. There is no osteonecrosis or fracture.

There is a joint effusion noted.

There is quadriceps and patellar tendinosis/tendonitis. There is a supra and infrapatellar plica. There is no chondromalacia or mass in the posterior compartment.

The ACL is heterogeneous and thickened with partial tearing. The PCL is intact. There is partial LCL tear. The MCL complex is intact. There is abnormal signal consistent with tearing of the medial meniscus. The lateral meniscus is intact. There are scattered ganglion and/or cysts.

IMPRESSION:

1. Joint effusion.
2. Partial ACL tear.
3. Scattered ganglion and/or cysts.
4. Tearing medial meniscus.
5. Partial LCL tear.
6. Quadriceps and patellar tendinosis/tendonitis. Supra and infrapatellar plica.

Thank you for the courtesy of this consultation.



Robert D. Solomon, M.D.
Board Certified Radiologist

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