

MED AID RADIOLOGY, LLC

481 NORTH 13TH STREET, NEWARK N.J. 07107, TEL:973-481-7770 FAX: 973-481-7755

PATIENT NAME: CARRION, VANESSA
DATE OF BIRTH: 12/23/1982
MRN #: M18359
DATE OF SERVICE: 01/22/2022
REFERRING PHYSICIAN: COLIN CLARKE, MD

MRI OF THE LEFT KNEE WITHOUT CONTRAST

INDICATION: MVA; left knee pain; assess for tear.

Technique: Exam was performed utilizing fast spin echo coronal, sagittal, and axial imaging with and without fat suppression.

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

Findings: Posterior cruciate ligament is intact. Anterior cruciate ligament mucoid change with periligamentous edema.

Medial collateral ligament is intact. Lateral complex is intact. Popliteus is intact with no muscle tear.

Medial meniscus is intact. Cartilage of medial joint is preserved.

Lateral meniscus is intact. Cartilage of lateral joint is preserved.

Trochlear cartilage is intact. Patellar cartilage is intact.

Patellar tendon is intact. Proximal tendinopathy. Quadriceps is intact.

Thickened medial plica. Joint effusion.

Hamstring and gastrocnemius tendinopathy with soft tissue edema.

No fracture. No contusion. No popliteal cyst.

Impression: Patella alta with lateral subluxation, thickened plica and joint effusion.

Thank you for the opportunity to participate in the care of this patient.



Mark Decker, M.D., D.A.B.R.
Musculoskeletal and Spine Specialist

MED AID RADIOLOGY, LLC

481 NORTH 13TH STREET, NEWARK N.J. 07107, TEL:973-481-7770 FAX: 973-481-7755

PATIENT NAME:	CARRION, VANESSA
DATE OF BIRTH:	12/23/1982
MRN #:	M18359
DATE OF SERVICE:	01/22/2022
REFERRING PHYSICIAN:	COLIN CLARKE, MD

Signed by MARK J. DECKER, MD at 01/25/2022 10:36:39 AM