

170-10 Cedarcroft Road, Jamaica, NY 11432 Tel: 718-206-1000 | Fax: 718-532-0633

PATIENT:

DESCRIPTION:

| ETIENNE, RONALD

EXAM DATE:

05/04/2022 4:00 PM

STUDY

CT KNEE WITHOUT CONTRAST

MRN:

ETIR61446

DOB:

08/23/1956

REFERRING

Zilberman, Igor DC

CLINICAL

PAIN DUE TO ACCIDENT

PHYSICIAN: GENDER

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HISTORY:

AIN DUE TO ACCIDENT GENDER

COMPUTED TOMOGRAPHY OF IMAGING OF THE KNEE WITHOUT IV CONTRAST

HISTORY: Pain due to accident.

TECHNIQUE: Multiplanar, multi-sequence MRI of the knee was performed without intravenous

contrast.

COMPARISON: None available.

FINDINGS:

OSSEOUS STRUCTURES/MARROW: No fractures or osteonecrosis.

LIGAMENTS:

ANTERIOR CRUCIATE: The anterior cruciate ligament is intact. POSTERIOR CRUCIATE: The posterior cruciate ligament is intact.

 $\label{thm:medial} \textbf{MEDIAL COLLATERAL LIGAMENT: The medial collateral ligament is intact.}$

LATERAL COLLATERAL LIGAMENT: The lateral collateral ligament is intact.

JOINT SPACES:

MEDIAL COMPARTMENT: There is joint space reduction of the medial compartment with small marginal osteophytes.

LATERAL COMPARTMENT: There is joint space reduction of the lateral compartment with small marginal osteophytes.

PATELLOFEMORAL COMPARTMENT: There is joint space reduction of the patellofemoral compartment with marginal osteophytes

SYNOVIUM/ JOINT FLUID: There is a joint effusion.



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HISTORY:

MUSCLES: No muscle edema or fatty muscle atrophy.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

EXTENSOR MECHANISM: The quadriceps tendon is intact. The patellar tendon is intact.

PERIPHERAL SOFT TISSUES: Normal.

PLICAE: No plicae demonstrated.

IMPRESSION:

- 1. Tricompartmental osteoarthritic changes of knee.
- 2. Joint effusion.

If there is further clinical concern for meniscal / ligament injury, MRI of the knee may be obtained as clinically warranted.

Digitally Signed By: Imam, Naiyer

Digitally Signed Date: 05/07/2022 6:51 AM