Star Medical Imaging PC

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PATIENT NAME: Timothy Mcfadden
DATE OF SERVICE: 5/4/2022
REFERRING DOCTOR: Sonia Sikand

MRI Left Knee:

MRI SCAN OF THE LEFT KNEE

CLINICAL HISTORY: Pain.

Routine non-contrast MRI images of the left knee were obtained. Prior imaging correlation is not available.

There is joint fluid compatible with synovitis. There is no evidence of popliteal cyst formation or muscular tear. There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures. Degenerative osseous and meniscal changes are present. There is almost total obliteration of the lateral compartment with subchondral degenerative changes, primarily in the lateral plateau. There is an osteophyte/spur impinging upon the lateral collateral ligament complex.

There is diffuse increased signal throughout the ACL. There is buckling of the otherwise normal PCL. There is no evidence of osseous translation. In the given clinical setting, the findings are suspicious for ACL sprain/interstitial tear. Clinical confirmation is requested.

The medial and lateral collateral ligament complexes are intact. The popliteal and quadriceps tendons and the patellar ligament are unremarkable. The patellar retinacula are intact.

A single image demonstrates a linear hyperintense signal extending to the superior articular surface of the posteromedial meniscal horn. Since the finding is only seen on a single image, this is compatible with a Grade 2B signal. Clinical confirmation of a posteromedial meniscal tear is requested.

The medial and lateral meniscal structures are otherwise intact. No other meniscal tears are suspected.

IMPRESSION:

DIFFUSE INCREASED SIGNAL THROUGHOUT THE ACL SUSPICIOUS FOR ACL SPRAIN/INTERSTITIAL TEAR AS DESCRIBED ABOVE.

POSTEROMEDIAL MENISCAL GRADE 2B SIGNAL AS DISCUSSED IN THE BODY OF THE REPORT. CLINICAL CONFIRMATION OF A POSTEROMEDIAL MENISCAL TEAR IS REQUESTED.

ALMOST TOTAL OBLITERATION OF THE LATERAL COMPARTMENT WITH SUBCHONDRAL DEGENERATIVE CHANGES AND SPUR IMPINGEMENT UPON THE OTHERWISE INTACT LATERAL COLLATERAL LIGAMENT COMPLEX.

PRESENCE OF JOINT FLUID COMPATIBLE WITH SYNOVITIS.

Thank you for the courtesy of this consultation.

John D. Lyons

John Lyons, M.D.
Radiologist