

MEDICAL MRI PC

101-07 Jamaica Ave Richmond Hill, N 418
Phone:(718) 374-3388 Fax:(347) 308-5757

PATIENT NAME: CHRISTIAN RAPHEL
REFERRING PHYSICIAN: DR. ALEXANDER KOPACH
SERVICE: MRI RIGHT KNEE
DATE OF SERVICE: 07/13/2022

MRI SCAN OF THE RIGHT KNEE

CLINICAL HISTORY: Pain.

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

There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures. There is joint fluid compatible with synovitis. There is no evidence of popliteal cyst formation or muscular tear.

There is diffuse swelling of the ACL. There is no buckling of the normal PCL. There is no evidence of osseous translation. In the given clinical setting, the findings are compatible with an ACL Grade I sprain.

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 inferior articular surface of the posteromedial meniscal horn. Since the finding is only seen on a single image, this is consistent with a Grade 2B signal (from the literature, 50% are positive for tears) and compatible with a posteromedial meniscal tear.

The medial and lateral meniscal structures are otherwise intact. There are no other meniscal tears.

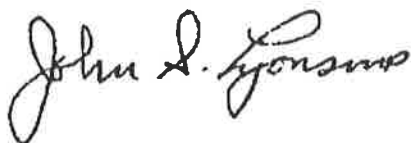
IMPRESSION:

PRESENCE OF JOINT FLUID COMPATIBLE WITH SYNOVITIS.

DIFFUSE SWELLING OF THE ACL COMPATIBLE WITH ACL GRADE I SPRAIN.

POSTEROMEDIAL MENISCAL TEAR AS DISCUSSED IN THE BODY OF THE REPORT.

Thank you for the courtesy of this consultation.



John Lyons, M.D.

Radiologist