

SKY RADIOLOGY

PATIENT NAME	HANSON, KEVIN
D.O.B.	08/14/1981
PATIENT #	1031
DATE OF SERVICE	7/26/2022 5:37:25 PM
REF. PHYSICIAN	RYBSTEIN, MARC MD

MRI OF THE RIGHT WRIST WITHOUT CONTRAST

INDICATION: Right wrist pain

TECHNIQUE: Axial, coronal, and sagittal T1, T2, and PD sequences were obtained in an open magnet.

COMPARISON: There are no prior studies available for comparison at the time of dictation.

FINDINGS:

There are few scattered interosseous benign cystic changes in the central capitate and in the distal ulna, and at this level there is also hyperintense signal suspicious for tear with mild fluid at the articular disc component of the TFCC. Series 7 image 10.

No fracture and bone marrow signal preserved. Joint spaces anatomically aligned.

The scapholunate, lunotriquetral ligaments appear intact. Carpal alignment is normal. The flexor and extensor tendons appear within normal limits. The extensor carpi ulnaris tendon is intact and normally situated in the ulnar groove. No fluid is seen within the visualized tendon sheaths. The carpal tunnel, flexor retinaculum and median nerve are unremarkable.

STIR imaging demonstrates no evidence of bone edema to suggest fracture, or stress reaction.

The distal radioulnar joint is in anatomic alignment.

No significant joint accumulation, fluid collections or masses are identified. No synovial thickening or cartilage defects. No volar or dorsal ganglion cysts.

IMPRESSION:

There are few scattered interosseous benign cystic changes in the central capitate and in the distal ulna, and at this level there is also hyperintense signal suspicious for tear with mild fluid at the articular disc component of the TFCC. Series 7 image 10

SKY RADIOLOGY P.C.

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Thank you for this kind referral of this patient.

B.V. Reddy MD

B.V. Reddy M.D.
Diagnostic Radiologist and Nuclear Medicine Physician
Diplomat of ABNM and ABR
MRI and Breast Imaging Specialist

Electronically Signed by REDDY, B.V. MD DR. at 8/2/2022 2:24:28 PM