

# STAR MEDICAL IMAGING PC

141 E. Merrick Road Valley Stream, NY, 11580  
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<b>PATIENT NAME:</b>	<b>ANDRE ISAAC</b>
<b>REFERRING PHYSICIAN:</b>	<b>PHYLLIS GELB</b>
<b>SERVICE:</b>	<b>MRI LEFT KNEE</b>
<b>DATE OF SERVICE:</b>	<b>07/05/2022</b>

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## MRI SCAN OF THE LEFT KNEE

**HISTORY:** History of MVA.

**TECHNIQUE:** Non-contrast MRI of the left knee was performed utilizing multiplanar and multisequence acquisition.

## FINDINGS:

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.

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 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. No other meniscal tears are suspected.

The anterior and posterior cruciate ligaments as well as 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.

## IMPRESSION:

**Presence of joint fluid compatible with synovitis.**

**Posteromedial meniscal tear as discussed in the body of the report.**

**The anterior and posterior cruciate ligaments as well as the medial and lateral collateral ligament complexes are intact.**

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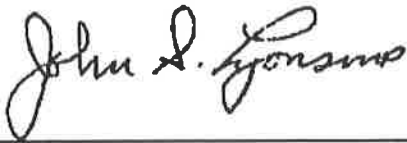
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Thank you for the courtesy of this consultation.



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John Lyons, M.D.

Radiologist