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MOHAN TRIPATHI MD  
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**SITE PERFORMED: LHR ELMHURST  
QUEENS BLVD**

**SITE PHONE: (718) 544-5151**

**Patient: ACEVEDO, JOSEPH**  
**Date of Birth: 10-28-1976**  
**Phone: (718) 954-0072**  
**MRN: 4331732R Acc: 1024518511**  
**Date of Exam: 09-11-2022**

**EXAM: MRI RIGHT KNEE WITHOUT CONTRAST**

**HISTORY:** Knee pain.

**TECHNIQUE:** Multiplanar, multi-sequence noncontrast MRI of the knee was obtained on a 3T scanner according to standard protocol.

**COMPARISON:** X-ray of 5/24/2022.

**FINDINGS:**

**Menisci:**

The medial meniscus is intact.

Peripheral horizontal tear of the anterior horn, and partial thickness radial tear superimposed on degenerative tear of the body and posterior horn of the lateral meniscus.

**Articular cartilage:**

Small low-grade partial-thickness cartilage loss central aspect of the medial femoral condyle.

Full-thickness cartilage fissures and defects superimposed on diffuse partial-thickness cartilage loss of the lateral femoral condyle lateral tibial plateau with underlying small patchy subchondral bone marrow edema diffuse full-thickness cartilage loss involves nearly the entire surface of the lateral patellar facet and small high-grade partial-thickness cartilage loss of the lateral trochlear facet.

**Extensor mechanism:**

Intact visualized distal quadriceps tendon.

The patellar tendon is intact.

Intact patellar retinacula.

Edema superolateral aspect of the Hoffa's fat.

The patellar tendon to patellar ratio measures 1.24, meeting the criteria of patella alta (>1.2 Insall-Salvati Index).

**Collateral Ligaments:**

Intact medial collateral ligament (MCL). The visualized pes anserine tendons are intact. Intact semimembranosus tendon.

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Intact lateral collateral ligament (LCL). Intact visualized iliotibial band, distal biceps femoris tendon and popliteus tendons.

**Cruciate Ligaments:**

Mild mucoid degeneration of the anterior cruciate ligament (ACL).  
Intact posterior cruciate ligament (PCL).

**Bones:**

Tricompartmental small marginal osteophytes.  
No acute fracture or osteonecrosis.  
Intact proximal tibiofibular joint.

**Fluid:**

Small joint effusion and synovitis.  
Multiloculated effusion and synovitis distends the infra-Hoffatic recess.  
Small popliteal cyst.

**Muscles and nerves:**

No muscle atrophy, or edema.  
The visualized sciatic tibial, and common peroneal nerves are preserved.

**IMPRESSION:** MRI of the right knee demonstrates:

1. Severe lateral, moderate to severe patellofemoral, mild medial compartmental osteoarthritis as detailed.
2. Peripheral horizontal tear of the anterior horn, and partial thickness radial tear superimposed on degenerative tear of the body and posterior horn of the lateral meniscus.
3. Mild mucoid degeneration of the ACL.
4. Small joint effusion and synovitis.
5. Multiloculated effusion and synovitis distends the infra-Hoffatic recess.
6. Edema superolateral aspect of Hoffa's fat pad, a finding associated patellar instability.
7. Patella alta.

Thank you for the opportunity to participate in the care of this patient.

Mark Choi MD - *Electronically Signed: 09-13-2022 5:35 PM*  
**Physician to Physician Direct Line is:** (347) 578-9760

Exam requested by: MOHAN TRIPATHI MD

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