



Community Medical Imaging

ACR Accredited Facility

159-16 Union Tpke • Fresh Meadows, NY 11366

Tel: 718-275-1010 • Fax: 718-591-3300

ISAAC KREIZMAN, M.D.
79-09 B NORTHERN BLVD.
JACKSON HEIGHTS, NY 11372

PATIENT: JEFFERSON SOFA
DOB: 02/19/1998
DOS: 08/02/2021
CHART #: 23404
EXAM: MRI OF THE LEFT KNEE WITHOUT CONTRAST

HISTORY: Sharp pain in left knee, anterior.

TECHNIQUE: Multiplanar MR imaging of the left knee was performed without contrast on Hitachi open MRI unit.

Coronal PD, T2 and STIR; Sagittal PD and PD fat suppressed; axial T2 and T2 fat suppressed of the knee were obtained.

COMPARISON: None.

FINDINGS: The PCL is unremarkable. There is no change in caliber. The ACL is intact. There is no change in caliber. The lateral meniscus is unremarkable. There is slight blunting of the inner edge noted at the anterior body of the medial meniscus. A focal vertical tear is noted. A small joint effusion is noted.

The patellofemoral compartment is unremarkable. There is no chondromalacia. There is no evidence of tracking abnormality. The retinacula are unremarkable.

The medial collateral ligament is unremarkable. There is no tear of the lateral collateral ligament.

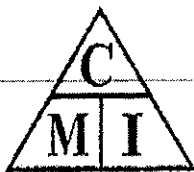
The quadriceps and patellar tendons are intact.

There is no bone bruise. There is no fracture. There is no osteochondral defect.

Minimal joint fluid is seen. Hoffa's fat pad is unremarkable.

~~There is no muscular injury. There is no Baker's cyst.~~

There are no incidental findings.



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IMPRESSION:

1. A FOCAL VERTICAL TEAR IS NOTED AT THE INNER EDGE SEEN AT THE ANTERIOR BODY OF THE MEDIAL MENISCUS, AS DESCRIBED.
2. SMALL JOINT EFFUSION IS SEEN WITHOUT EVIDENCE OF A LOOSE BODY.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 08/02/2021

E-Sig By A. McDonnell, MD on 08/03/2021 06:48:28