



30-80 31st Street, Astoria, NY 11102  
Tel: 718-335-7100 | Fax: 718-709-4136

PATIENT:	CABRERA, FRANCISCO	EXAM DATE:	03/23/2022 4:51 PM
STUDY DESCRIPTION:	MRI KNEE WITHOUT CONTRAST (JOINT)	MRN:	CABF60789
DOB:	09/05/1985	REFERRING PHYSICIAN:	Mcgee, John J
CLINICAL HISTORY	pain in lt. knee after mva	GENDER	M

**MAGNETIC RESONANCE IMAGING OF THE LEFT KNEE WITHOUT IV CONTRAST**

**HISTORY:** Pain in left knee after motor vehicle accident.

**TECHNIQUE:** Multiplanar, multi-sequence MRI of the left knee was performed without intravenous contrast.

**COMPARISON:** None available.

**FINDINGS:**

**OSSEOUS STRUCTURES/MARROW:** Extensive areas of geographic T2W hypointense signal with surrounding bone marrow edema noted in the proximal tibial and fibular metaphysis extending into the proximal shafts – probable bone infarct. Suggested dedicated involving correlation.

**LIGAMENTS:**

**ANTERIOR CRUCIATE:** The anterior crudate ligament is intact.

**POSTERIOR CRUCIATE:** The posterior crudate ligament is intact.

**MEDIAL COLLATERAL LIGAMENT:** The medial collateral ligament is intact.

**LATERAL COLLATERAL LIGAMENT:** The lateral collateral ligament is intact.

**JOINT SPACES:**

**MEDIAL COMPARTMENT:** Grade I signal intensity changes noted in the posterior horn of the medial meniscus.

**LATERAL COMPARTMENT:** Intact lateral meniscus and articular cartilage.

**PATELLOFEMORAL COMPARTMENT:** Articular cartilage intact.

**SYNOVIUM/ JOINT FLUID:** There is no joint effusion.



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MUSCLES: No muscle edema or fatty muscle atrophy.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

EXTENSOR MECHANISM: There is linear interstitial tearing of the distal quadriceps tendon superimposed on tendinitis. There is patellar tendinitis.

PERIPHERAL SOFT TISSUES: Normal.

PLICAE: No plicae demonstrated.

**IMPRESSION:**

1. Extensive areas of geographic T2W hypointense signal with surrounding bone marrow edema in the proximal tibial and fibular metaphysis extending into the proximal shafts – probable bone infarct. Suggested dedicated involving correlation.
2. Linear interstitial tearing of the distal quadriceps tendon superimposed on tendinitis.
3. Grade I signal in the posterior horn of the medial meniscus compatible with trauma sequelae.

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