

New York Medical & Diagnostic Care P.C.

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Hollis, NY 11423

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PATIENT NAME: Henriquez, Cynthia

DATE OF BIRTH: 2/13/80

REFERRING PHYSICIAN: Dr. Stanley Kim

DATE OF EXAM: 7/13/22

MRI OF THE RIGHT KNEE:

TECHNIQUE: Sagittal, axial and coronal images of the right knee were performed using spin-echo and gradient echo pulse sequences.

CLINICAL HISTORY: Pain.

FINDINGS: Marrow signal is unremarkable. The distal femur and proximal tibia are intact. There is no osteonecrosis or fracture. There is narrowing of the femorotibial joint.

There is a joint effusion noted. Superficial varicose veins are noted.

There is quadriceps and patellar tendinosis/tendonitis. Patella alta or high positioned patella. There is a supra and infrapatellar plica. There is chondromalacia and thinning.

There is partial ACL tearing. The PCL is intact. There is Grade I-II LCL sprain. The MCL complex is intact. The medial is intact without evidence of tearing or morphology. There is a discoid shape to the lateral meniscus.

IMPRESSION:

1. Joint effusion.
2. Narrowing of the femorotibial joint.
3. Discoid shape lateral meniscus.
4. Grade I-II LCL sprain.
5. Quadriceps and patellar tendinosis/tendonitis. Supra and infrapatellar plica. Patella alta or high positioned patella. Chondromalacia and thinning.
6. Partial ACL tear.

Thank you for the courtesy of this consultation.



Robert D. Solomon, M.D.
Board Certified Radiologist

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