STAND-UP MRI OF THE BRONX, P.C.
2050 Eastchester Road, Suite 1B • Bronx, NY 10461
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MULTI-POSITION MRI
Accredited by the American College of Radiology

CHRIS GARCIA **N10100110-BI** **Report Date:** 05/28/2022
DOB: 09/26/1995
Exam Date: 05/27/2022

AJIN MATHEW PA
1320 LOUIS NINE BLVD
BRONX, NY 10459

MAGNETIC RESONANCE IMAGING OF THE RIGHT KNEE

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position on a high-field 1.5 Tesla magnet.

HISTORY: Patient complains of right knee pain.

COMPARISON: 01/15/2020.

INTERPRETATION: There is again a slight component of lateral patellar tilt and there is again synovial fluid at the level of the patellofemoral articular surface and anteriorly at tibiofemoral articular surface. Synovial fluid is slightly increased in volume at the inferior recess of Hoffa's fat pad.

There is new thickening and strain of the medial collateral ligament at its anterior attachment site on the femur. The anterior cruciate ligament again appears attenuated and nonprogressive and compatible with interstitial partial-thickness tearing.

Osseous signal and morphology are, otherwise, unremarkable. The medial meniscus, the lateral meniscus, the lateral collateral ligament, the posterior cruciate ligament, quadriceps and patellar tendons are, otherwise, unremarkable.

IMPRESSION:

- Again slight component of lateral patellar tilt and again synovial fluid at the level of the patellofemoral articular surface and anteriorly at tibiofemoral articular surface. Synovial fluid is slightly increased in volume at the inferior recess of Hoffa's fat pad.

- New thickening and strain of the medial collateral ligament at its anterior attachment site on the femur. The anterior cruciate ligament again appears attenuated and nonprogressive and compatible with interstitial partial-thickness tearing.

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KNEE RIGHT MRI 73721

Sincerely,

Steven Winter, M.D.
Diplomate of the American Board of Radiology
Fellowship Trained in Musculoskeletal Radiology
SW/JR