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PATIENT NAME: DIALLO, AISSATOU
PATIENT DOB: 06/23/1970
CHART NUMBER: 044956
EXAM DATE: JUNE 08, 2022
REFERRING PHYSICIAN: DR.KOPACH, ALEKSANDR

MRI OF THE RIGHT KNEE

Clinical History: Pain; s/p injury.

Protocol: T1 and T2 axial and sagittal images

Findings: The anterior and posterior horns of the medial and lateral menisci are normal in configuration. There is no acute medial or lateral meniscal tear. The cartilaginous surfaces in the weight bearing aspects of the knee are intact.

The anterior cruciate ligament is intact but swollen and irregular in appearance consistent with a sprain or partial tear. The posterior cruciate ligament is normal. There is subchondral signal abnormality present in the anterolateral aspect of the medial femoral condyle with surrounding fluid. Subchondral cystic changes are present in the tibial plateau. There are no acute fractures. There is a sprain of the medial collateral ligament. The lateral collateral ligamentous complex is intact.

There is extensive subcutaneous swelling and edema in the anterior aspect of the knee extending from mid patella to the proximal tibia. There is marked attenuation of the medial patellar retinaculum with lateral tracking of the patella and suprapatellar effusion.

The popliteus tendon is intact. The gastrocnemius muscles are normal in signal intensity. The popliteal fossa is unremarkable.

IMPRESSION:

1. SUBCHONDRAL CYSTIC CHANGES IN THE TIBIAL PLATEAU AND IN THE ANTEROMEDIAL ASPECT OF THE MEDIAL FEMORAL CONDYLE.
2. SPRAIN OR PARTIAL TEAR OF THE ANTERIOR CRUCIATE LIGAMENT AND THE MEDIAL COLLATERAL LIGAMENT.
3. EXTENSIVE SUBCUTANEOUS SWELLING AND EDEMA IN THE ANTERIOR ASPECT OF THE KNEE.
4. MARKED ATTENUATION OF THE MEDIAL PATELLAR RETINACULUM WITH LATERAL TRACKING OF THE PATELLA AND SUPRAPATELLAR EFFUSION.

Thank you for the courtesy of this referral.

**** Electronically Signed ****

Charles DeMarco, M.D.

Diplomate, American Board of Radiology