

## STAND-UP MRI OF BENSONHURST, P.C.

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MULTI-POSITION MRI

Accredited by the American College of Radiology

SEVERA LODGE

N10113843-BE I

Report Date:

08/09/2022

DOB:

10/08/1979

Exam Date: 08/09/2022

GORDON C DAVIS DO 150 GRAHAMAVE BROOKLYN, NY 11206

## MAGNETIC RESONANCE IMAGING OF THE LEFT KNEE

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position.

**HISTORY:** The patient complains of left knee pain with difficulty walking. Status-post MVA 6/29/2020.

**INTERPRETATION**: There is sprain of the medial collateral ligament which demonstrates heterogeneous intrasubstance signal abnormality approaching the proximal insertion on the medial femoral condyle.

There is lateral patellar tilt and insertional tendinosis distal quadriceps tendon.

Trace fluid within the knee joint, predominantly within the patellofemoral compartment, and there is a small ruptured ganglion cyst which dissects inferiorly along the medial margin of the gastrocnemius.

Osseous signal and morphology are, otherwise, unremarkable. The medial meniscus, the lateral meniscus, the lateral collateral ligament, the anterior and posterior cruciate ligaments, patellar tendon are, otherwise, unremarkable.

## IMPRESSION:

- Sprain of the medial collateral ligament which demonstrates heterogeneous intrasubstance signal abnormality approaching the proximal insertion on the medial femoral condyle.
- Lateral patellar tilt and insertional tendinosis distal quadriceps tendon.
- Trace fluid within the knee joint, predominantly within the patellofemoral compartment and small ruptured ganglion cyst which dissects inferiorly along the medial margin of the gastrocnemius.

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**SEVERA LODGE** 

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**Exam Date:** 

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Thank you for referring your patient to us for evaluation.

Sincerely,

Ronald Wagner, M.D.

Diplomate of the American Board of Radiology with added Qualifications in Neuroradiology

RW/aw