



**QUEENS RADIOLOGY
IMAGING PC**
DIAGNOSTIC RADIOLOGY

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PATIENT:	ALFRED, SHERLIE	EXAM DATE:	07/01/2022 12:30 PM
STUDY DESCRIPTION:	MRI KNEE WITHOUT CONTRAST (JOINT)	MRN:	ALFS70697
DOB:	01/07/1991	REFERRING PHYSICIAN:	Jurkovich, Michael
CLINICAL HISTORY:	N/F Left Knee Pain after MVA.	GENDER:	F

Magnetic resonance imaging of the left knee without IV contrast

Clinical history pain of the left knee at the time of MVA

Comparison: None

Description:

MRI of the left knee was performed using multiplanar, multi echo pulse sequence. No IV contrast was given. The

Osseous structures/marrow: There is no bony fractures or osteonecrosis.

Ligaments

Anterior cruciate ligament: There is increased signal adjacent to the ACL indicating ACL sprain sequela. No ACL tear noted.

Posterior cruciate ligament: Posterior cruciate ligament is intact

Medial collateral ligament: Medial collateral ligament is intact

Lateral collateral ligament,: Lateral collateral ligament is intact

Joints

Medial compartment: No meniscal tear and cartilage is intact

Lateral compartment: Radial tear is seen at the body of the lateral meniscus. Cartilage is intact

Patellofemoral compartment: Cartilage is intact

Synovium/joint fluid: No joint effusion



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Muscles: No muscle edema or fatty atrophy present

Neurovascular structures: Normal in course and caliber

Extensor mechanism: Quadriceps tendon is intact. There is edema adjacent to the patella tendon representing paratenonitis.

Peripheral soft tissues: There is prepatellar edema and increased signal in Hoffa's fat pad

Plica: None present

Impression:

1. Increased signal adjacent to the ACL indicating ACL sprain sequela. No ACL tear noted.
2. Radial tear is seen at the body of the lateral meniscus. Cartilage is intact
3. Edema adjacent to the patella tendon representing paratenonitis. Prepatellar edema and increased signal in Hoffa's fat pad

Digitally Signed By: Izzo, Joseph

Digitally Signed Date: 07/02/2022 6:46 PM