



To:	Davis, Gordon	Patient Name:	Turcios, Dowal
Exam:	MRI LEFT KNEE	DOB:	02/16/1971
Exam Date:	09/20/2022 1:23 PM	Gender:	M
Accession:	31722	MRN:	TurD6106

LEFT KNEE MRI WITHOUT CONTRAST

HISTORY: Left knee pain status post motor vehicle accident

TECHNIQUE: Multiplanar, multi-sequence MRI of the left knee was obtained without intravenous contrast.

COMPARISON: None available.

FINDINGS:

LIGAMENTS: There is a full-thickness tear of the anterior cruciate ligament. The posterior cruciate ligament is intact. There is laxity of the medial collateral ligament without a discrete full-thickness tear. The lateral collateral ligament is intact.

MEDIAL COMPARTMENT: There is extensive multifocal tearing of the posterior horn and body of medial meniscus with medial extrusion of the body segment. There are broad regions of full-thickness chondral loss on both sides of the medial compartment with marginal osteophytes.

LATERAL COMPARTMENT: There are free edge tears at the posterior horn and anterior horn/body junction of lateral meniscus. There is superficial chondral fibrillation on both sides of the lateral compartment. Marginal osteophytes are noted.

PATELLOFEMORAL COMPARTMENT: There is partial thickness chondral loss at the lateral trochlear sulcus with superimposed deep chondral fissuring and subchondral cystic change. There is additional deep chondral fissuring at the lateral patellar facet. There are marginal osteophytes.

MARROW: Normal marrow signal. There is subcortical fibrocystic change at the anterior aspect of lateral tibial plateau which is likely enthesopathic related to the attachments of the anterior root of lateral meniscus and the anterior cruciate ligament.

SYNOVIUM/ JOINT FLUID: There is small joint fluid.

MUSCLES: No muscle edema or fatty muscle atrophy.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

EXTENSOR MECHANISM: The quadriceps tendon is intact. There is patellar tendinitis.



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PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

Full-thickness tear of the anterior cruciate ligament.

Extensive multifocal tearing of the posterior horn and body medial meniscus with medial extrusion of the body segment. Free edge tears at the posterior horn and anterior horn/body junction of lateral meniscus.

Background of tricompartmental arthrosis, severely affecting the medial compartment.

Patellar tendinitis.

Electronically Signed by: Borukhov, David MD on 09/21/2022 1:53 PM