MULTI-POSITION™MRI

STAND-UP MRI OF THE BRONX, P.C.

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JOHN HOPSON **N10016332-BI** **Report Date:** 03/24/2022
DOB: 09/02/1965
Exam Date: 03/21/2022

MELLITA SHAKHMUROV PA
2426 EASTCHESTER RD
BRONX, NY 10461

MRI OF THE RIGHT KNEE WITHOUT CONTRAST

TECHNIQUE: Multiplanar, multisequential MRI was performed in the 30 degree tilt position.

INDICATION: The patient complains of right knee pain.

COMPARISON: No prior studies were available for comparison at the time of dictation.

FINDINGS:
Complex tear of the body and posterior part of the medial meniscus extending partially into the posterior root. There is mild extrusion of the body. Partial tear and sprain of the MCL. Medial compartment joint narrowing with high-grade cartilage loss and marginal osteophytes. Mild patellar subluxation and tilt with high-grade patellofemoral cartilage loss. Small joint effusion. 6 cm popliteal cyst. 2 cm ganglion cyst posterior to the PCL.

No fracture. Bone marrow signal is normal.

Lateral meniscus is intact. No meniscocapsular separation. No meniscal cyst.

ACL is intact. PCL is intact. Lateral (fibular) collateral ligament is intact. Conjoined tendon is intact. Popliteus tendon is normal.

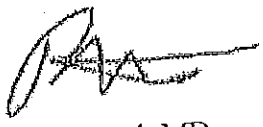
Patellar tendon is intact. Quadriceps tendon is intact. Patellofemoral ligaments are intact.

No intra-articular loose body. Visualized muscle signal is normal.

IMPRESSION:
1. Complex tear of the body and posterior part of the medial meniscus extending partially into the posterior root. There is mild extrusion of the body.
2. Partial tear and sprain of the MCL.

3. Medial compartment joint narrowing with high-grade cartilage loss and marginal osteophytes.
4. Mild patellar subluxation and tilt with high-grade patellofemoral cartilage loss.
5. Small joint effusion. 6 cm popliteal cyst. 2 cm ganglion cyst posterior to the PCL.

Sincerely,



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PP/ad