STAND-UP MRI OF BENSONHURST, P.C.
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MULTI-POSITION™ MRI

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CYNTHIA RIVERA **N10126705-BE** **Report Date:** 09/28/2022
DOB: 04/21/1972
Exam Date: 09/26/2022

GORDON C DAVIS DO
150 GRAHAM AVE
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, clicking and swelling, difficulty walking, status post MVA 08/26/2022.

INTERPRETATION: Signal elevation is identified within the medial meniscus in the posterior horn and body region associated with intrasubstance tear on coronal sequence images 20-25 and sagittal sequence images 7-9.

Signal alteration within the anterior horn of the lateral meniscus is suggestive of mucoid degeneration (Type II signal change).

Moderate medial and lateral femorotibial compartment degenerative changes are noted with osteophyte formation arising from both medial and lateral femoral condyles with relative preservation of joint space height. Subcortical degeneration is noted in both the medial and lateral tibial plateau.

A 3 mm bone island is suggested within the medial femoral condyle.

There is no evidence of discontinuity or retraction of the anterior cruciate ligament to indicate tear. There is no evidence of discontinuity or retraction of the posterior cruciate ligament to indicate tear.

There is no evidence of a tear of the medial collateral ligament. There is no evidence of a tear of the lateral collateral ligament. There is no evidence of a tear of the quadriceps tendon. There is no evidence of a tear of the patellar tendon.

There is no evidence of a tear of the medial or lateral patella retinaculum. Popliteus peritendinous fluid is associated with tenosynovitis.

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There is no evidence of a tear of the semimembranosus/semitendinosus tendons. There are no signal changes associated with the iliotibial band. There is no evidence of degenerative changes in the proximal tibiofibular articulation.

A moderate joint effusion is noted with suprapatellar and infrapatellar components. There is no evidence of a Baker's cyst posterior to the medial femoral condyle.

Marked patellofemoral compartment degenerative changes are noted with joint space narrowing, osteophyte formation arising from the superior and inferior patella and anterior distal femur, and thinning of the articular cartilage. Patellofemoral chondromalacia is identified measuring approximately 1.6 cm in the anterior lateral femoral condyle and with multiple foci within the posterior patella. Anterior soft tissue edema is noted adjacent to the patella and patellar tendon.

Tibial tubercle to trochlear groove distance measures approximately 7 mm, within normal limits.

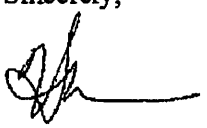
Variation in bone marrow distribution pattern is noted within the distal femur and proximal tibia. There is no evidence of bone marrow signal changes to indicate fracture, avascular necrosis, or osteomyelitis.

IMPRESSION:

- Intrasubstance tear of medial meniscus.
- Prominent patellofemoral compartment degenerative changes with patellofemoral chondromalacia.
- Moderate medial and lateral compartment degenerative changes.
- Anterior soft tissue edema.
- Moderate effusion.
- Popliteus tenosynovitis.

Thank you for referring your patient to us for evaluation.

Sincerely,



Harold M. Tice, M.D.
Diplomate of the American Board of Radiology
HT/ig

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KNEE LEFT MRI 73721