Dr Alireza Khakzadeh

Health Hub Doctors Morayfield 19-31 Dickson Road Morayfield 4506

Tel: 0753224900 **16th June 2022**

June 2022 Reported: 16 June 2022

Patient ID: 77.133640

Accession Number: 77.38283246

Dear Dr Khakzadeh

Re: Ms Kaiya Chen - DOB: 04/08/1993

2 Spring Lane CABOOLTURE 4510

MRI RIGHT KNEE

Clinical History:

Patellofemoral syndrome.

Scan Protocol:

Axial, sagittal and coronal PD fat sat; sagittal PD; coronal T1.

Findings:

Synovium and Joint Capsule: No significant effusion.

Bones and marrow: No marrow oedema or microtrabecular fracture.

Anterior Cruciate Ligament: Intact.

Posterior Cruciate Ligament: Intact.

Anterior compartment:

Tendons: The patellar tendon is elongated with Insall Salvati ratio of 1.6.

Lateral patellar translation borderline increased measuring 17 mm.

Articular Cartilage: No chondral defect. The trochlear groove is shallow.

Medial compartment:

Medial Meniscus: No tear or significant degenerative changes.

Articular Cartilage: No chondral defect or abnormality.

Medial Collateral Ligament: Intact.

Posteromedial Corner: No obvious injury.

Lateral compartment:

Lateral Meniscus: No tear or significant degenerative changes.

Articular Cartilage: No chondral abnormality.

Lateral Collateral Ligament complex: Intact.

Posterolateral Corner: No obvious injury.

Superficial Soft Tissues: A small lobulated ganglion cyst arises from the proximal tibiofibular articulation.

CONCLUSION:

The trochlear groove is shallow with mildly increased patellar translation and an elongated patellar tendon consistent with patellar alta.

MRI LEFT KNEE

Clinical History:

Patellofemoral syndrome.

Scan Protocol:

Axial, sagittal and coronal PD fat sat; sagittal PD; coronal T1.

Findings:

Synovium and Joint Capsule: No significant effusion.

Bones and marrow: No marrow oedema or microtrabecular fracture.

Anterior Cruciate Ligament: Intact.

Posterior Cruciate Ligament: Intact.

Anterior compartment:

Tendons: The Insall-Salvati ratio is mildly increased measuring 1.53.

Patellar translation measures 16 mm which is borderline increased.

Oedema is present within the supra lateral aspect of Hoffa's fat pad. No significant thickening of the lateral patellofemoral retinaculum.

Articular Cartilage: No chondral defect. The trochlea is shallow

Medial compartment:

Medial Meniscus: No tear or significant degenerative changes.

Articular Cartilage: No chondral defect or abnormality.

Medial Collateral Ligament: Intact.

Posteromedial Corner: No obvious injury.

Lateral compartment:

Lateral Meniscus: No tear or significant degenerative changes.

Articular Cartilage: No chondral abnormality.

Lateral Collateral Ligament complex: Intact.

Posterolateral Corner: No obvious injury.

Superficial Soft Tissues: No significant abnormality.

CONCLUSION:

Patellar tendon length and lateral translation are mildly increased. There is oedema in the superolateral aspect of Hoffa's fat pad beneath the patella with features of lateral patellar impingement.

Dr David Preston

Electronically signed at 5:33 pm Thu, 16th Jun 2022