LEWIS, NICOLE

2 ETHEL STREET UNGARIE NSW

Phone:

0269759307

Birthdate:

04/07/1977

Sex:

F

Medicare Number:

24693963671

Your Reference: 15198357

Lab

15198357

Reference:

Laboratory:

Regional Imaging

JEYADINESH

Addressee:

JEYADINESH

VELAUTHAM

Name of test:

MRI GP Referred Scan Right Knee over 16

25/11/2022

Collected:

Referred by: JEYADINESH VELAUTHAM

07/12/2022

Requested

05/12/2022 Reported:

14:05:00

## CLICK HERE TO VIEW IMAGES IN I-MED ONLINE

For assistance please email i-medonline@ril.com.au.

This report is for: J. Velautham

Referred By: J. Velautham

MRI R KNEE 05/12/2022 Reference: 15198357

Clinical Notes: Twisting injury right knee, pain over medial aspect of knee. Medial meniscus injury?

## MRI RIGHT KNEE

Triplane imaging without contrast was acquired. Image quality is suboptimal, because of the large body part size.

Medial compartment:

Heterogeneous degenerative signal is present in the posterior half of the medial meniscus, where there is also an ill-defined inferior surface tear and a flap tear of the free edge of the posterior horn. No displaced tear fragment is shown.

Mild-moderate chondropathy and a very small amount of subchondral oedema at the medial end of the medial tibial plateau.

Mild high signal deep and superficial to the medial collateral ligament and thus there may be a low grade injury of it, but this could also represent degenerative change.

Lateral compartment:

Meniscus is intact, as is articular cartilage and the lateral collateral ligament complex.

Anterior compartment:

Patella is not high and is enlocated and articular cartilage of the anterior compartment is intact, as are the quadriceps and patellar tendons.

A small-moderate sized joint effusion is present, as is a small Baker's cyst and there is evidence of recent rupture of the Baker's cyst, because there is some fluid tracking around the surfaces of the medial gastrocnemius muscle head from the Baker's cyst.

Mild-moderate degenerative signal is present in the anterior cruciate ligament, but it is probably functionally intact. PCL is intact.

No bone injury shown.

Radiologist: Dr N. Stephenson N/A

In light of the COVID-19 pandemic there will be ongoing changes to I-MED services and hours. Please visit imed.com.au for the latest information. I-MED is committed to continuing to provide service where possible and safe to do so.