

Patient Name	CORCORAN, Sandra	Accession	64.843773_1
Patient D.O.B.	02/04/1970	Description	MRI Right Knee
Patient ID	64.216218	Study Date/Time	15/03/2021 13:38
Referring Physician	Ogundare, William	Modality	MR

Patient Details: CORCORAN, Mrs Sandra ID: 64.216218
 DOB: 02/04/1970 Gender: F Acc No: 64.843773
 68 Perserverance Street WEST WYALONG
 NSW 2671

Report To: DR W OGUNDARE
 33 Maitland Street
 WEST WYALONG NSW 2671

Exam Date: Monday, 15 March 2021
 Site: Wagga Wagga
 Address: Suite 15, 325 Edward Street Wagga
 Wagga NSW 2650
 Phone: 0269716100
 Copies To:

MRI RIGHT KNEE

Clinical Notes:

Painful right knee. Catches on extension of knee ? meniscal tear.

Report:

Normal appearance of the right ACL, PCL, LCL, iliotibial band and posterolateral corner structures. There is a mild sprain of the MCL which remains intact.
 Normal appearance of the lateral meniscus and lateral compartment articular cartilage. Small lateral joint line osteophytes are noted.

The medial meniscus features linear increased signal but this does not contact an articular surface and appears to represent linear degeneration rather than a tear. Normal appearance of the medial compartment articular cartilage.

Normal appearance of the quadriceps tendon and patellar tendon. No sign of patella alta or baja. The femoral trochlear groove is unusually hypoplastic and shallow. There is moderate lateral patellar subluxation and mild lateral patellar tilt. Focal bone marrow oedema is seen at the inferior pole of the patella and on the lateral femoral condyle associated with oedema superolaterally in Hoffa's fat pad and a small joint effusion. This suggests recent patellar subluxation. There is oedema in the prepatellar bursa consistent with bursitis. There is degenerative signal alteration in the patellofemoral compartment articular cartilage with full thickness chondral loss on the lateral patellar facet. Normal appearance of the popliteal fossa. No Baker's cyst.

Conclusion:

Probable patellofemoral subluxation with chondromalacia patellae.

Electronically signed by: Dr Corinne Wong at 2:54 PM Mon, 15 Mar 2021