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|--------------|-------------------|---------------|---------------------|
| Patient Name | : Mr . DEERAJ | Reg No | : HMN102201519 |
| Age/Gender | : 32 Years / Male | Reg Date | : 13-Oct-2022 12:26 |
| Ref.Dr | : Doctor C | Reported Date | : 14-Oct-2022 10:22 |

MRI LEFT KNEE JOINT

Technique:

Multiplanar, multiecho imaging of the knee was done.

Findings:

There is small to moderate knee joint effusion.

Cruciate & collateral Ligaments:

Post ACL reconstruction status.

The ACL graft is intact and shows good ligamentization and alignment.

Femoral Tunnel:

The intraarticular portion of the femoral tunnel opens at the superolateral posterior margin of the intercondylar notch.

Tibial Tunnel:

The distal portion of the tunnel is near the tibial tuberosity and the intraarticular opening of the tunnel is completely posterior to where the Blumensaat line equivalent on MRI, intersects the tibia.

There is buckling of posterior cruciate ligament; however appear intact.

Rest of the collateral ligaments and the patellar retinaculae are intact.

Menisci:

Medial meniscus: Grade II with mild irregularities along undersurface of posterior body and posterior horn.

Root attachments are intact.

Lateral meniscus is normal, except for diffuse degeneration along anterior horn and anterior root.

Bones & articular cartilage:

Multifocal areas of grade II-III chondromalacia along medial patellar and trochlear facets.

Small degenerative cysts with edema along intercondylar eminence subjacent to anterior root attachment of lateral meniscus.

Rest of the Bones and articular cartilage along the patellofemoral and femorotibial compartments appear normal.

The posteromedial and posterolateral corner structures look intact.

Tendons of biceps femoris and popliteus look normal.

Conclusion:

*** ACL graft is intact with screw and endobutton insitu.**

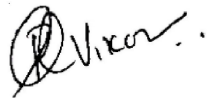
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- Multifocal areas of grade II-III chondromalacia along medial patellar and trochlear facets.
- Grade II with mild irregularities along undersurface of posterior body and posterior horn of medial meniscus.
- * Diffuse degeneration along anterior horn and anterior root of lateral meniscus. Small degenerative cysts with edema along intercondylar eminence subjacent to anterior root attachment of lateral meniscus.
- * No other significant abnormality detected.

SUGGESTED CLINICAL CORRELATION AND FOLLOW UP

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