

Patient Name	: Mr.ARCHIT TIWARI	Visit No	: CHA250038125
Age/Gender	: 30 Y/M	Registration ON	: 03/Mar/2025 12:21PM
Lab No	: 10135420	Sample Collected ON	: 03/Mar/2025 12:21PM
Referred By	: Dr.KGMU (ORTHO)	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 03/Mar/2025 05:53PM

MRI: RIGHT KNEE JOINT

IMAGING SEQUENCES (NCMR)

AXIAL: PD FS Wis. **SAGITTAL:** T1, T2, PD FS, GRE Wis. **CORONAL:** PD FS & GRE Wis.

Bone marrow edema is seen in lateral tibio-femoral condyles – bone contusion.

Mild synovial effusion is seen in tibio-femoral and patello-femoral compartments.

Small cystic lesion (approx 17x 11x 70mm) is seen in medial aspect of popliteal fossa – suggestive of baker cyst.

There is discontinuity of anterior cruciate ligament with non visualization of fibers in its mid part — suggestive of complete tear. Posterior cruciate ligament is buckled but normal in signal intensity.,

Medial patello-femoral ligament shows PD hyperintensity & irregularity near its femoral attachment – partial tear

Posterior horn of medial meniscus is displaying linear area of intermediate signal intensity, which is not extending upto articular surface - suggestive of grade II meniscal degeneration.

Lateral collateral ligament shows T2/PD hyperintensity & irregularity near its femoral attachment – partial tear.

Lateral meniscus and anterior horn of medial meniscus are displaying normal size, outline and signal intensity.

Medial collateral ligament is normal in morphology, signal intensity and outline.

Femorotibial, patellofemoral & tibio-fibular bony alignment are normal. Rest of the visualized bones are showing normal articulation, alignment, cortical outline and bone marrow signal intensity. Quadriceps tendon and patellar ligament are normal.



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Periarticular musculotendinous attachments and vascular flow voids are unremarkable.

IMPRESSION:

- **Complete tear of anterior cruciate ligament.**
- **Grade-II degeneration of posterior horn of medial meniscus**
- **Partial tear of medial patello-femoral & lateral collateral ligaments.**
- **Bone contusion in lateral tibio-femoral condyles with mild synovial effusion.**
- **Small cystic lesion in medial aspect of popliteal fossa – suggestive of baker cyst.**

Please correlate clinically.

Typed by Ranjeet

**DR. RAVENDRA SINGH
MD**

CHARAK



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MRI: LEFT KNEE JOINT

IMAGING SEQUENCES (NCMR)

AXIAL: PD FS Wis. **SAGITTAL:** T1, T2, PD FS, GRE Wis. **CORONAL:** PD FS & GRE Wis.

Bone marrow edema is seen in medial tibio-femoral condyles – bone contusion.

Mild synovial effusion is seen in tibio-femoral and patello-femoral compartments.

Mild fluid distention of semimembranosus bursa is noted.

There is discontinuity of anterior cruciate ligament with non visualization of fibers in its mid part — suggestive of complete tear. Posterior cruciate ligament is buckled but normal in signal intensity.,

Posterior horn of medial meniscus is displaying linear area of intermediate signal intensity, which is not extending upto articular surface - suggestive of grade II meniscal degeneration.

Lateral meniscus and anterior horn of medial meniscus are displaying normal size, outline and signal intensity.

Medial & lateral collateral ligaments are normal in morphology, signal intensity and outline.

Femorotibial, patellofemoral & tibio-fibular bony alignment are normal. Rest of the visualized bones are showing normal articulation, alignment, cortical outline and bone marrow signal intensity. Quadriceps tendon and patellar ligament are normal.

Periarticular musculotendinous attachments and vascular flow voids are unremarkable.

IMPRESSION:

- **Complete tear of anterior cruciate ligament.**
- **Grade-II degeneration of posterior horn of medial meniscus.**
- **Bone contusion in medial tibio-femoral condyles with mild synovial effusion.**

Please correlate clinically.

DR. RAVENDRA SINGH
MD

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*** End Of Report ***

