

Patient Name	: Mr. SHYAM SINGH	Visit No	: CHA250042996
Age/Gender	: 35 Y/M	Registration ON	: 10/Mar/2025 03:03PM
<b>Lab No</b>	<b>: 10140291</b>	Sample Collected ON	: 10/Mar/2025 03:03PM
Referred By	: Dr. KGMU	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 10/Mar/2025 07:11PM

## **MRI: LEFT KNEE JOINT**

### **IMAGING SEQUENCES (NCMR)**

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

Linear fracture line is seen in lateral tibial plateau, extending upto the articular surface. Mild bone marrow edema is seen along the fracture line. No any displaced bony fragment is seen.

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

Anterior cruciate ligament is diffusely thickened and shows T2/PD hyperintensity. Posterior cruciate ligament is mildly 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 collateral and 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:**

- **Linear fracture line in lateral tibial plateau with mild surrounding bone marrow edema - ? stress fracture.**
- **Diffusely thickened and hyperintense in anterior cruciate ligament - ? mucoid degeneration.**
- **Grade- II degeneration of posterior horn of medial meniscus.**
- **Mild synovial effusion**

Please correlate clinically.

**DR. RAVENDRA SINGH**  
**MD**

Typed by Ranjeet



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\*\*\* End Of Report \*\*\*

