

Patient Name : Mr. AVINASH KUMAR THAKUR
Age/Gender : 61 Y/M
Lab No : 10142313
Referred By : Dr. NORTHERN RAILWAY
Refer Lab/Hosp : NORTHERN RAILWAY LKO

Visit No : CHA250045018
Registration ON : 13/Mar/2025 09:57AM
Sample Collected ON : 13/Mar/2025 09:57AM
Sample Received ON :
Report Generated ON : 13/Mar/2025 01:49PM



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MRI: RIGHT KNEE JOINT

IMAGING SEQUENCES (NCMR)

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

Mild synovial effusion is seen in patellofemoral compartment with extension in suprapatellar bursa.

Tibial spines are prominent with small osteophytic spur formation seen at tibiofemoral and patellar margins. Joint spaces are mildly reduced with thinning of patellar articular cartilages. Mild subchondral bone marrow edema is seen in medial tibiofemoral condyles.

Posterior horn of medial meniscus along with posterior root is displaying globoid area of intermediate signal intensity, which is extending upto articular surface — suggestive of grade-III degeneration.

Thickening and irregularity of proximal part of medial gastrocnemius tendon is noted near its femoral attachment, showing PD hyperintensity and irregularity. Mild underlying bone marrow edema is seen in medial femoral condyle.

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

Anterior cruciate, posterior cruciate, medial collateral and lateral collateral ligaments are normal in morphology, signal intensity and outline.

Femorotibial, patellofemoral and tibio-fibular bony alignment are normal. Rest of 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:

- **Bony degenerative changes with chondromalacia patellae and mild synovial effusion.**
- **Grade-III degeneration of posterior horn and root of medial meniscus.**
- **Tendinosis with partial tear of medial gastrocnemius tendon.**

Please correlate clinically.

DR. RAVENDRA SINGH
MD

Transcribed by R R...

*** End Of Report ***



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