

Patient Name	BROHAN, Daryl	Accession	64.1165702_1
Patient D.O.B.	09/01/1985	Description	MRI Left Knee
Patient ID	64.483820	Study Date/Time	09/01/2023 09:07
Referring Physician	Eldash, Khaled	Modality	MR

Patient Details: BROHAN, Mr Daryl ID: 64.483820
 DOB: 09/01/1985 Gender: M Acc No: 64.1165702
 94 Church Street WEST WYALONG NSW UR Number:
 2671

Report To: DR K ELDASH COPIES TO:
 4/29
 WEST WYALONG NSW 2671

Exam Date: Monday, 09 January 2023
 Site: Wagga Wagga
 Address: Suite 15, 325 Edward Street Wagga
 Wagga NSW 2650
 Phone: 0269716100

MRI LEFT KNEE

Clinical Details:

Chronic left knee pain. Pain got worse on the last three days after helping at home with furniture work. Pain over the joint line. Positive McMurray's test. Need to exclude meniscal injury.

Findings:

The anterior and posterior cruciate ligaments are intact. Medial and lateral collateral ligaments are intact. Popliteus tendon is normal.

The medial meniscus demonstrates an extensive non-displaced oblique tear of its posterior body, posterior horn and extending into the posterior root. There is a small displaced flap of the inferior leaflet into the meniscotibial gutter and small posterior parameniscal cysts measuring up to 5mm. Very mild medial compartment cartilage loss with full thickness chondral fissures of the posterior non-weight bearing medial femoral condyle and some generalised chondral heterogeneity.

The lateral meniscus is intact. Minimal lateral compartment chondral loss with some full thickness chondral fissures and ulcers at the posterior non-weight bearing lateral femoral condyle with underlying bone marrow stress response.

Quadriceps and patellar tendons are normal. Patellofemoral compartment cartilage is maintained.

No abnormal fat pad oedema. Small joint effusion. Small intact Baker's cyst measuring 18 x 17 x 41mm (ML x AP x SI).

Conclusion:

1. Extensive oblique tear of the medial meniscus posterior body, horn and posterior root with a small displaced fragment into the meniscotibial gutter and small parameniscal cysts.
2. Cartilage of the knee joint is well maintained, with only minimal chondral loss of the

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medial and lateral femoral condyles.

Electronically signed by: Dr Yen Huynh at 12:48 PM Mon, 9 Jan 2023