



Dr Lisa Grant
Mudgeeraba General Practice
Suite 5, Bell Place Professional Centre
1 Bell Place
MUDGEERABA QLD 4213

cc:

Mr Aleks Baruksopulo, Sports & Spinal, Shop 1.17 - 1.18, Oasis Shopping Centre, 75 Surf Parade, BROADBEACH QLD 4218

Ms Tracey Spruyt, My Rehab Co, 1276 Gold Coast Highway, PALM BEACH QLD 4221

Ms Sonya Panzram, 17/80 Durginan Street, CURRUMBIN QLD 4223

04/10/2024

Dear Lisa,

RE: Ms Sonya Panzram DOB: 01/03/1973
17/80 Durginan Street, CURRUMBIN QLD 4223 Mobile: 0402 135 839

I had the pleasure of reviewing Sonya in my clinic today.

Diagnosis:

Right high-grade plantar fasciopathy with associated insertional tear.

MRI right ankle 3.10.24

Confirming clinical suspicion, there is marked central band origin plantar fasciopathy with intrinsic oedema/delamination, mild perifascial soft tissue oedema and bone oedema at the small plantar calcaneal spur. Chronic far posterolateral talar dome osteochondral lesion. Small amount of subchondral cystic change also posterior central tibial plafond.

Repeated an US-guided PRP infiltration of the central band of the plantar fascia.

Plan:

Intrinsic foot muscle strength.

I will review Sonya in 8 weeks.

Kind Regards,

Dr Ryan Kohler MBChB, MPhil (Sports Med), FACSP, MSc (MSK Ultrasound)
Sports Injuries and MSK Ultrasound Specialist Physician
Sports Injuries HQ 2024. All Rights Reserved
391 Ashmore Road Ashmore QLD 4214
Ph: 07 5597 1648 Fax: 07 5597 0946
E: reception@sportsinjurieshq.com

ABN 85600312169 Provider No 427866GL LSPN 11988

* A thorough history, examination and relevant investigations are performed on all athlete patients referred to Dr Kohler

The medical description you're providing suggests several findings related to the foot and ankle. Here's a breakdown of the terms:

1. Marked central band origin plantar fasciopathy with intrinsic oedema/delamination:

- **Plantar fasciopathy** refers to damage or dysfunction of the plantar fascia, a band of tissue that supports the arch of the foot.
- **Central band origin** indicates that the issue is at the central part of the fascia where it attaches to the heel bone (calcaneus).
- **Intrinsic oedema/delamination** suggests swelling (oedema) and a breakdown or separation (delamination) of the tissue in that area, which can cause pain and difficulty walking.

2. Mild perifascial soft tissue oedema:

- This refers to mild swelling around the fascia in the soft tissues, possibly indicating inflammation or irritation.

3. Bone oedema at the small plantar calcaneal spur:

- **Plantar calcaneal spur** is a bony growth that forms on the heel bone, often associated with plantar fasciopathy.
- **Bone oedema** indicates fluid buildup or inflammation in the bone near the spur, which can cause pain.

4. Chronic far posterolateral talar dome osteochondral lesion:

- This refers to damage in the cartilage and underlying bone of the talus, a bone in the ankle. The **posterolateral** aspect is the back and outer side of the talus.
- **Osteochondral lesion** means that both the bone and cartilage have been affected, potentially causing pain or joint instability.

5. Small amount of subchondral cystic change also posterior central tibial plafond:

- **Subchondral cystic change** refers to the formation of cysts beneath the cartilage, which can be a sign of degenerative changes or arthritis.
- The **tibial plafond** is the bottom part of the tibia, where it meets the ankle joint. This finding suggests some damage or changes to this area as well.

In summary, the imaging findings suggest chronic inflammation and degeneration in multiple structures in the foot and ankle, including the plantar fascia, heel bone, and talus. There may be osteoarthritis or other degenerative changes contributing to pain and dysfunction in the affected areas.