

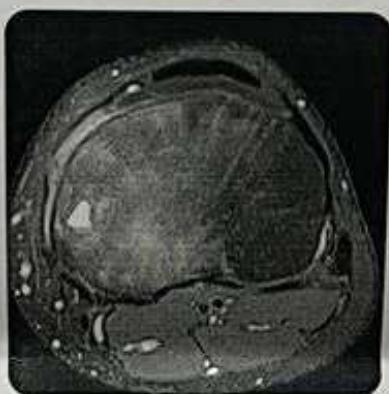
Monday, July 25, 2022

Patient Name : UTKARSH SATI

Age : 30Y/M

Referring Physician : Self

MRI of the left knee on July 25, 2022 at Dev Imaging and Diagnostic Centre, Patna



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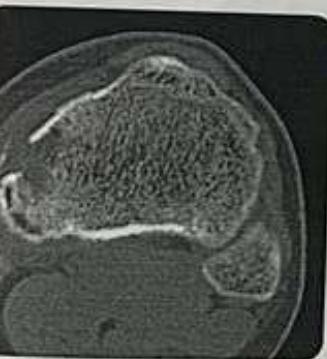
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Clinical History: Pain

Technique: Multiplanar multiecho MRI of the left knee without and with intravenous contrast.

Findings:

Focal ill-defined lytic area is seen in the proximal medial tibia, approximately measuring 1.6 x 1.5 x 3.0 cm (AP by transverse by craniocaudal) with moderate to marked adjoining marrow oedema. Associated medial cortical erosion and small associated adjoining collection, approximately measuring 2.2 x 0.7 x 2.2 cm (AP by transverse by craniocaudal). There is moderate to greater adjoining soft tissue and popliteus muscle oedema. On post-contrast images, the lytic area as well as the adjoining collection reveals enhancement.

Medial meniscus, articular cartilage and medial collateral ligament are intact.

No lateral femorotibial marrow oedema. Lateral meniscus and articular cartilage are intact. Popliteus, fibular collateral ligament, biceps femoris and iliotibial band are intact.

Patella is normal in position. Extensor mechanism is intact. Articular cartilage and patellofemoral ligaments are intact.

Anterior and posterior cruciate ligaments are intact.

There is mild physiologic joint fluid. More subtle lobulated Baker's cyst. Neurovascular structures appear unremarkable.

Impression/conclusion:

Findings are in keeping with proximal medial tibial osteomyelitis with focal 1.6 x 1.5 x 3.0 cm ill-defined enhancing lytic area, moderate to marked adjoining marrow oedema. Associated medial cortical erosion and small associated adjoining collection, approximately measuring 2.2 x 0.7 x 2.2 cm (AP by transverse by craniocaudal). moderate to greater adjoining soft tissue and popliteus muscle oedema. Tissue sampling and histopathological correlation is recommended for further evaluation.

Intact menisci, ligaments and articular cartilage.