

3T-MRI
Left Ankle/Hindfoot

9/6/2013

EXAM:
Left Ankle/Hindfoot MRI Without Contrast

EXAM DATE: 9/6/2013 04:12 PM.

CLINICAL HISTORY: Sinus Tarsi syndrome left, lateral ankle impingement.
COMPARISON: None.

TECHNIQUE: Multiplanar, multisequence T1-weighted and fluid-sensitive sequences of the ankle/hindfoot without contrast.
Other: None.

FINDINGS:

Bones: The region of abnormal increased T2 signal is seen along the undersurface of the talus in the sinus Tarsi, please also note that there is a small fracture at the middle subtalar joint at the talar surface. Please see series 8, image 17; series 6, image 12. Some edema also is seen along the medial aspect of the distal talus. Please see series 4, image 12.

Articular Cartilage: Subtalar joints show cartilaginous defects or chondromalacia. Talar dome is intact. No OCD lesions.

Ligaments: The anterior and posterior tibiofibular, anterior and posterior talofibular, and calcaneofibular ligaments are intact. The deep bundle of the deltoid ligament is intact, although significantly edematous. Superficial bundle is more normal. Spring ligament is intact and also edematous.

Anterior Tendons: The tibialis anterior, extensor hallucis longus, and extensor digitorum longus tendons are unremarkable.

Medial Tendons: The tibialis posterior, flexor digitorum longus, and flexor hallucis longus tendons are unremarkable.

Lateral Tendons: The peroneus brevis and longus are unremarkable.

Achilles Tendon: The Achilles tendon per se is unremarkable, significant pre-Achilles swelling and edema is present. Please see series 8, image 16.

Musculature: No edema or fatty atrophy.

Other: No effusions. Sinus Tarsi shows significant increased T2 signal. The talocalcaneal interosseous ligament also shows a generous amount of signal within it. No plantar fasciitis. The subcutaneous tissues are unremarkable.

IMPRESSION:

1. Nondisplaced fracture is seen at the middle subtalar joint at the talar surface on series 8, image 13; series 6, image 12. Some edema also seen at the medial aspect of the distal talus. The edema within the sinus Tarsi may be related to this fracture.
2. Some edema also seen in the the otherwise intact-appearing deep and superficial bundles of the deltoid ligament, as well as a spring ligament.
3. Pre-Achilles tendinitis.
4. Lateral collateral ligament complexes, tendons of plantar flexion and anteflexion are otherwise, unremarkable.