NATIONALRad
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PATIENT:	JOHN SMITH
DOB:	5/5/1955
FILE #:	12345
PHYSICIAN:	REFERRING
EXAM:	MRI LEFT FOOT
DATE:	1/1/2011

CLINICAL INFORMATION

Left medial foot and ankle pain and swelling. Plantar metatarsal pain for 5 weeks. No known trauma.

COMPARISON

None

TECHNIQUE

Sagittal T1 and STIR, short axis PD and STIR, long axis PD FS imaging is performed through the left midfoot and forefoot without contrast.

FINDINGS

There is diffuse marrow edema throughout the proximal phalanx of the second digit. There is no definite fracture or cortical disruption identified. There is mild soft tissue edema and swelling along the plantar aspect of the second toe and second metatarsophalangeal joint.

The Lisfranc joint and ligament are normal. The metatarsal shafts are normal.

The first metatarsophalangeal joint and hallucal sesamoidal complex appear intact. The flexor and extensor halluces longus tendons are normal.

There is focal soft tissue edema and thinning and attenuation and findings suggestive of a partial-thickness tear

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involving the medial aspect of the plantar plate of the second metatarsophalangeal joint with a small joint effusion and mild capsulitis.

The third, fourth and fifth metatarsophalangeal joints are normal.

No significant intermetatarsal bursitis. No evidence of Morton's neuroma. The flexor and extensor tendons and musculature of the midfoot appear normal.

IMPRESSION

1. There is focal soft tissue edema and swelling along the plantar aspect of the second metatarsophalangeal joint. Findings are suggestive of a partial-thickness tear/sprain involving the medial aspect of the plantar plate of the second metatarsophalangeal joint. There is a small joint effusion with evidence of mild capsulitis.

2. There is diffuse marrow edema within the proximal phalanx of the second digit. Differential diagnosis includes bone contusion and/or stress related edema. There is no definite fracture identified in this region. Infection seems less likely as an etiology for the marrow edema, recommend clinical correlation with any clinical signs of infection.

[NationalRad Musculoskeletal Radiologist]
Board Certified Radiologist

THIS REPORT WAS ELECTRONICALLY SIGNED

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