

OBSERVATION

Examination: MRI Left Ankle

Clinical indication: Talar dome lesion, degenerative disease, positive for fragments.

Procedure: Thin slice MRI images were obtained through the ankle. Sagittal and coronal reconstructions were performed.

Findings:

Osseous Structures: The distal tibia and fibula are intact. The talus exhibits edema in the medial aspect of the talar dome at the tibiotalar articulation. There is moderately severe chondromalacia overlying this with a small indentation in the osseous talar dome at this site and edema extending inferiorly from this. This is consistent with an osteochondral lesion of the talar dome without evidence of a loose fragment at this site. There is some subtle bony reaction in the adjacent medial malleolus. The remainder of the talus is intact. The calcaneus is intact. The cuboid and navicular are intact. There is some chondral thinning and subchondral cyst formation in the posterior facet of the subtalar joint.

Tendons: The flexor and peroneal tendons are intact. The extensor and Achilles tendons are intact.

Ligaments: The medial ligament complexes are intact, but there is some scarring of the anterior tibiotalar ligament. The lateral ligaments are also intact, but again with some scarring in the anterior fibulotalar ligament. The distal syndesmotric ligaments are intact. The calcaneal insertion of the plantar fascia is normal.

Soft Tissues: No masses are observed in the tarsal tunnel. The contents and ligaments of the sinus tarsi are intact. No soft tissue masses or other foci of soft tissue edema are demonstrated.

IMPRESSION

1. Osteochondral lesion of the medial talar dome
 - a. moderately severe focal chondromalacia.
 - b. slight indentation of the bony surface at this site.
 - c. underlying osseous edema extending inferiorly.
2. Mild degenerative disease of the articular surface of the medial femoral condyle and to a lesser degree the distal tibia.
3. Subchondral cyst formation and chondral thinning of the posterior facet of the subtalar joint.
4. Scarring of the anterior tibiotalar and anterior fibulotalar ligaments.

