



8705 Gracie Allen Drive | Los Angeles, CA 90048 | Phone: (310) 423-8000

FINAL RESULT

PATIENT NAME: Boone, Jane
Exam: CT ANKLE LEFT WO CONTRAST
DATE OF EXAM: 04/13/2023 11:06 AM
AGE: 66 yrs

MRN	BIRTHDATE	PATIENT TYPE	Accession No:
090173171	06/12/1956	Outpatient	20230372668

REQUESTING PHYSICIAN: Evangelatos, Dennis W
CC:

Study Result

Narrative & Impression

CT ANKLE LEFT WO CONTRAST, CT FOOT LEFT WO CONTRAST - 4/13/2023 1:38 PM and 11:29 AM

CLINICAL INDICATION: Left foot and ankle pain.

COMPARISON: Left foot x-ray series 3/16/2020. Left foot MRI 7/15/2020.

TECHNICAL FACTORS LEFT ANKLE: Multiple thin slice transverse CT images were obtained of the left ankle without intravenous contrast. Multiplanar reformations were performed.

TECHNICAL FACTORS LEFT FOOT: Multiple thin slice transverse CT images were obtained of the left foot without intravenous contrast. Multiplanar reformations were performed.

FINDINGS:

BONE AND CARTILAGE: Status post first metatarsophalangeal arthroplasty with double stem silicone implant, which is in anatomic alignment without hardware failure or periprosthetic fracture. Mild periprosthetic osteolysis of the first proximal phalanx and first metatarsal is not significantly changed. The arthroplasty is in mild extension and varus angulation, as before.

Severe hypertrophic change of the medial hallux sesamoid and moderate hypertrophic change of the lateral hallux sesamoid is stable.

Mild degenerative change affects the second and third distal interphalangeal joints.

Trace second hammertoe, mild third claw toe, and moderate fourth hammertoe are present.

Mild degenerative change affects the fourth proximal interphalangeal joint.

Moderate varus of the second and third metatarsophalangeal joints and fourth proximal interphalangeal joint is unchanged.

Severe hindfoot valgus, moderate pes planus, and moderate forefoot abduction are present. Mild subtalar impingement is present.

Moderate volume of fluid is in the posterior recess of the posterior subtalar joint.

The talonavicular joint contains a small effusion dorsally.

Moderate subchondral cyst of the base of the fourth metatarsal and moderate dorsal joint space narrowing with mild subchondral sclerosis of the fourth tarsometatarsal joint has intervally developed.

MUSCLES AND TENDONS: The extensor, flexor, peroneal and achilles tendons are intact. The muscles demonstrate normal morphology and attenuation.

SKIN AND SUBCUTANEOUS TISSUES: The subcutaneous soft tissues are normal.

MISCELLANEOUS: No additional findings.

IMPRESSION:

1. Status post first metatarsophalangeal arthroplasty with double stem silicone implant with unchanged mild periprosthetic osteolysis of the first proximal phalanx and first metatarsal.
2. Interval development of moderate osteoarthritis of fourth tarsometatarsal joint.
3. Moderate fourth hammertoe with mild osteoarthritis of fourth proximal interphalangeal joint.
4. Moderate pes planus, severe hindfoot valgus, and moderate forefoot abduction with mild subtalar impingement.

RADIATION EXPOSURE: DLP: 88.41 mGy-cm (accession 20230372668), DLP: 114.91 mGy-cm (accession 20230372669) CTDI VOL (1): 3.75 mGy (accession 20230372668), CTDI VOL (1): 4.87 mGy (accession 20230372669)

One or more of following dose reduction techniques were used:

- * Automated exposure control.
- * Adjustment of the mA and/or kV according to patient size.
- * Use of iterative reconstruction technique.

Reviewed and Interpreted by: Joseph Giaconi, M.D. 4/18/2023 5:29 PM

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