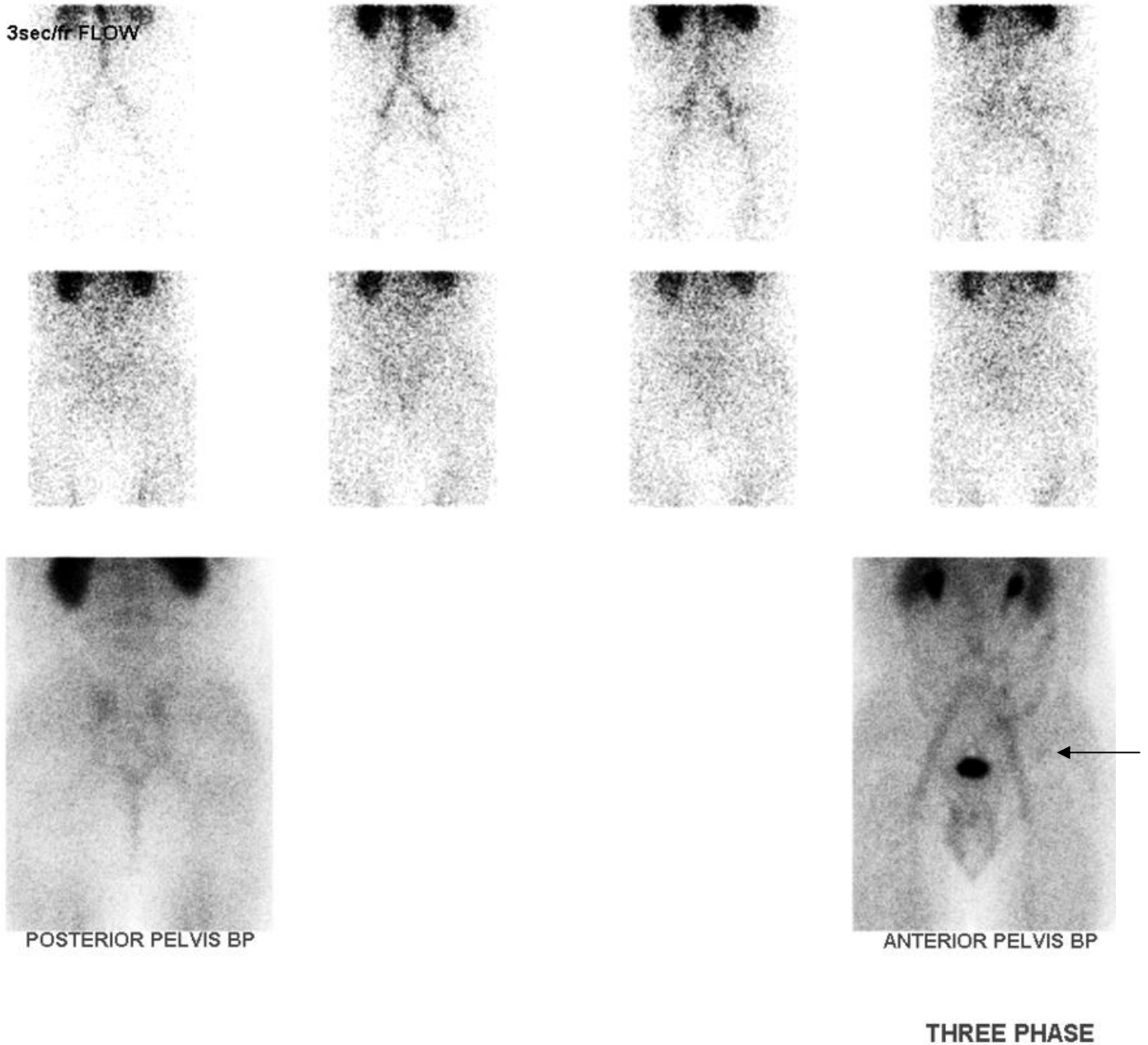


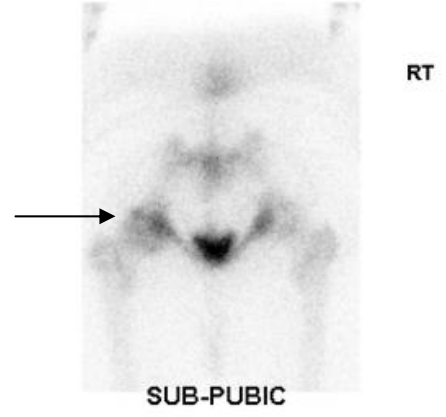
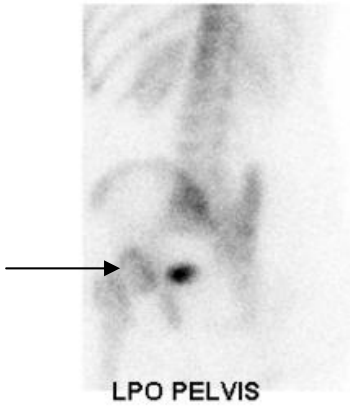
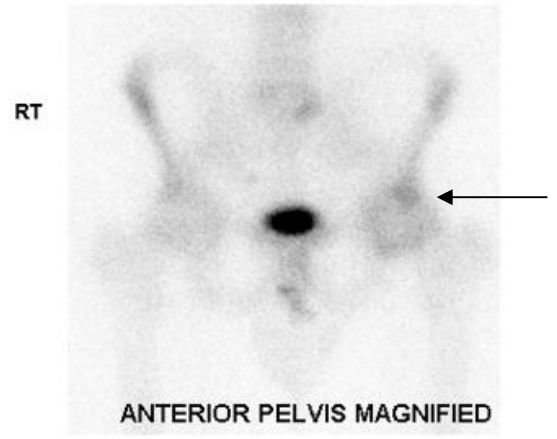
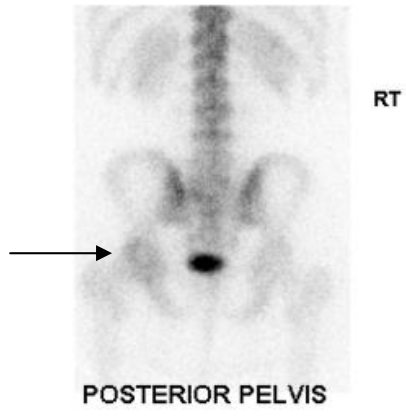
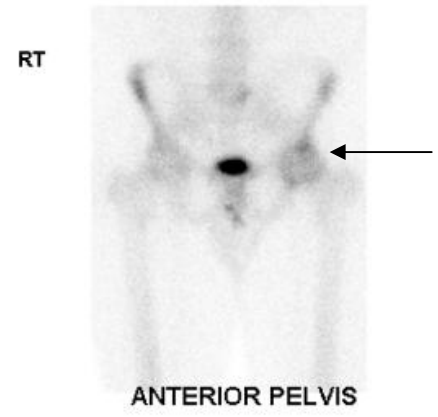
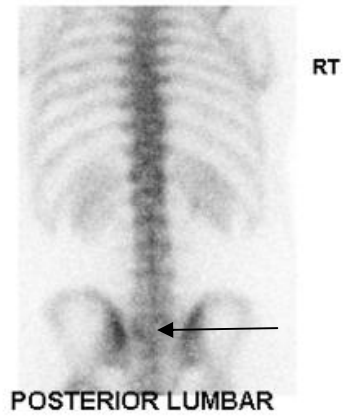
LABRAL TEAR OF THE LEFT HIP.

A 57yo male presented with severe left hip and lower back pain, post surgery for peri-anal abscess 6 weeks ago. Patient has a history of arthritis in the hip joints.

BURWOOD NUCLEAR MEDICINE



Early dynamic flow and blood pool images of the hips and pelvis were obtained. There was minor hyperaemia in the region of the superior lip of the left acetabulum.



THREE PHASE

BURWOOD NUCLEAR MEDICINE

In the delayed images, there moderate to marked, focal increase in uptake by the superior lip of the left acetabulum and in the adjacent left femoral head superiorly.

There was moderate, diffuse increase in uptake in the left hip joint with milder uptake in the right hip joint. There as mild irregular uptake in L5 anteriorly on the left.

The scan appearance demonstrated abnormal tracer uptake in the superior lip of the left acetabulum, which is consistent of a labral tear. The scan abnormality in the adjacent left femoral head is most likely due to osteochondral injury. There was synovitis of the left hip.

There was also evidence of moderately severe degenerative arthritis in the left hip, with milder arthritis in the right.

Mild degenerative disease was seen on the left side of L5/S1 facet joint.