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# A Female Patient with Posterior Lateral Right Knee Pain and a Palpable Mass

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## Section 1 - Quiz

#### **Case description**

A 65-year-old woman presented to her primary care physician complaining of 2–3 weeks of pain at the back outer aspect of the right knee with an associated slightly mobile and tender mass. The patient denied any history of trauma and stated that the pain worsened during knee flexion. She is retired but remains active with daily short walks and has not engaged in any recent new activities. She also mentioned that the pain was initially a dull achy pain but had now become severe. She had been trying to self-treat with alternating ice and heat with no significant improvement. She had no pertinent medical or surgical history.

On physical examination, there was localized tenderness and swelling at the posterior lateral aspect of the right knee. There was no discoloration of the overly skin. In addition, an approximately 1–2 cm slightly mobile firm mass was felt near the area of the fibular head. Pain was elicited during passive

Anterior

**Figure 1:** Sonographic images of the posterior lateral right knee. (a) Short-axis image and (b), (c and d) long-axis images demonstrate a grouping of multiple echogenic foci (open arrows) along a tendon (T), adjacent to the fibular head (F)

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and active knee flexion. The primary care physician suspected bursitis or a ganglion.

The patient was then referred to radiology for a musculoskeletal ultrasound to further evaluate. Radiographs were also obtained.

Sonographic imaging demonstrated a grouping of multiple echogenic foci, at the posterior lateral aspect of the right knee, adjacent to the fibular head [Figure 1]. The radiographs confirmed multiple ill-defined densities adjacent to the fibular head [Figure 2].

#### WHAT IS THE DIAGNOSIS?

#### **Declaration of patient consent**

The author certifies that they have obtained all appropriate patient consent forms. In the form, the patient has given her consent for her figures and other clinical information to be reported in the journal. The patient understands that her name and initials will not be published, and due efforts



Figure 2: Anteroposterior (a) and lateral (b) radiographs of the right knee show multiple ill-defined densities (open arrows) adjacent to the fibular head

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will be made to conceal her identity, but anonymity cannot be guaranteed.

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have not included an acknowledgment in our manuscript, then that indicates that we have not received substantial contributions from nonauthors.

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#### **Conflicts of interest**

There are no conflicts of interest.