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| **Supplementary Material.** Score form used for triangular fibrocartilage complex assessment in healthy asymptomatic adolescents with illustrative images from young symptomatic gymnasts that were not included in the present study | | | | | |
| **A** | **WRIST POSITIONING** | |  | | |
| 1.1 | **Ulnar prestyloid recess position**  *Axial PD* | □ Neutral | | □ Dorsal rotation (supinated) | □ Volar rotation (pronated) |
| **B** | **TRIANGULAR FIBROCARTILAGE (TFC)** | |  | | |
| 1.1 | **TFC morphology – On the sagittal slice where the TFC is at its thinnest**  *Sagittal PD* | □ Symmetrical biconcave disc | | □ Biconcave disc dorsal thicker than volar | □ Biconcave disc volar thicker than dorsal |

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| 1.2 | **TFC morphology – On the mid-coronal slice where the TFC is at its thinnest**  *Coronal PD and PD SPAIR* | □ Slightly radial tilted asymmetrical bowtie | | □ Shorter, thicker and more horizontal structure | | □ Thinner and more stretched structure | |
| 1.3 | **TFC thickness – On the mid-coronal slice where the TFC is at its thinnest**  *Coronal PD and PD SPAIR* |  | H:\Onderzoek\PhD Projecten\2. Normal TFCC appearance on MRI\Castor Images\TFC thickness mm.JPG  \_ . \_ \_ mm at the thinnest point | | 0.00 mm when cannot be measured | |  |
| 1.4 | **Homogeneity**  *Coronal PD and PD SPAIR* | □ Homogeneous hypointens without increased signal | □ Diffuse increased signal not extending to the joint surface | | □ Linear vertical increased signal with disruption of the disc | | □ Other |

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| **C** | **RADIOULNAR LIGAMENTS (RUL’s)** | |  | | | |
| 1.1 | **Homogeneity dorsal RUL – sagittal**  *Sagittal PD* | □ Continuous with TFC | | □ Not continuous with TFC | | □ Not able to assess |
| 1.2 | **Homogeneity volair RUL – sagittal**  *Sagittal PD* | □ Continuous with TFC | | □ Not continuous with TFC | | □ Not able to assess |
| 1.3 | **Fiber continuity dorsal RUL – axial**  *Axial PD and T2 SPAIR* | □ Continuous fibers | | □ Fiber disruption | | □ Not able to assess |
| 1.4 | **Fiber continuity volar RUL – axial**  *Axial PD and T2 SPAIR* | □ Continuous fibers | | □ Fiber disruption | | □ Not able to assess |
| **D** | **PROXIMAL (DEEP) AND DISTAL (SUPERFICIAL) LAMINA** | | | |  | |
| 1.1 | **Homogeneity proximal lamina**  *Coronal PD and PD SPAIR / sagittal PD* | □ Homogeneous hypointens | | □ Diffuse lamination | | □ Not able to assess |

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| 1.2 | **Homogeneity distal lamina**  *Coronal PD and PD SPAIR / sagittal PD* | □ Homogeneous hypointens | | | □ Diffuse lamination | | □ Not able to assess | |
| **E** | **LIGAMENTUM SUBCRUENTUM** | | |  | | | | |
| 1 | **Visibility**  *Coronal PD SPAIR* |  | □ Hyperintens signal between the proximal and distal lamina | | | □ Not visible | |  |

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| **F** | **PRESTYLOID RECESS** | | |  | | | | |
| 1 | **Visibility**  *Coronal PD SPAIR* | □ Tubular shaped | □ Conical shaped | | | □ Saccular shaped | | □ Not visible |
| **G** | **MENISCUS HOMOLOGUE** | | |  | | | | |
| 1 | **Visibility**  *Coronal PD en PD SPAIR* | □ Clearly delineated hypointensity | | | □ Diffuse hypointensity | | □ Not visible due to diffuse hyperintensity | |

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| **H** | **EXTENSOR CARPI ULNARIS (ECU)** | | |  | | | | |
| 1.1 | **ECU position in ulnar groove**  *Axial PD and T2 SPAIR* | □ Completely within ECU groove | | | □ Partially within ECU groove | | □ Completely outside ECU groove | |
| 1.2 | **Peritendinous signal intensity – from the ECU groove until distal extensor retinaculum**  *Axial T2 SPAIR* |  | □ Hypointens or intermediate signal | | | □ Focal increased signal | |  |

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| 1.3 | **Intratendinous signal intensity – from the ECU groove until distal extensor retinaculum**  *Axial T2 SPAIR* |  | | □ Homogeneous hypointens | □ Focal or linear increased signal | |  |
| 1.4 | **Location increased signal**  *Axial T2 SPAIR* | □ Not applicable | □ Proximal from the styloid process | | □ At the styloid process level | □ Distal from the styloid process | |

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| **I** | **DISTAL RADIOULNAR JOINT (DRUJ)** | |  | | |
| 1.1 | **Effusion radioulnar**  *Coronal PD SPAIR and axial T2 SPAIR* | □ Absent | | □ Small amount | □ Substantial amount |

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| 1.2 | **Cysts – ulnar sided wrist**  *Coronal PD SPAIR and axial T2 SPAIR* | □ Absent | | □ Volar | □ Dorsal |
| **J** | **PISOTRIQUETRAL JOINT (PTJ)** | |  | | |
| 1.1 | **PTJ effusion**  *Coronal PD SPAIR* | □ Absent | | □ Small amount | □ Substantial amount |

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| **K** | **OTHER RELEVANT FINDINGS** |
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