

<b>Patient:</b>	<i>Wozniak Cyprian kamil</i>	<b>Ref. Physician</b>	<i>DIMITRIADIS KYRIAKOS</i>
<b>ID:</b>	0500547231	<b>Exam. Date</b>	18/11/2024
<b>Ref.Number:</b>	57110560	<b>CPT:</b>	73221
<b>BirthDate:</b>	15/03/1975	<b>Age:</b>	49 years old
<b>Gender:</b>	M	<b>GESY CODE:</b>	930136

## MRI RIGHT SHOULDER

### **Technique:**

The examination was performed in a GE Optima MR360 1.5T MRI and includes axial, coronal and sagittal T1 and PD fat sat sequences.

### **Findings:**

There is a type I acromion. Early degenerative change is seen at the acromioclavicular joint, with a slight loss of space and formation of tiny osteophytes.

Acromiohumeral distance measures 8mm and there is a suggestion of only minor impingement on the rotator cuff tendons.

There is abnormal high PD fat sat signal intensity around the distal supraspinatus and infraspinatus tendon fibres, also noted at the tendon footprint to the greater tuberosity of the humerus, in keeping with mild tendinitis. No suggestion of a significant associated tendon tear.

Normal appearance of the rest of the rotator cuff tendons. No significant tendinitis or a tendon tear.

There is a minor amount of fluid in the subacromial/subdeltoid bursa, in keeping with mild bursitis.

Normal appearance of the tendon of the long head of biceps.

No muscle atrophy.

There is evidence of moderate degenerative change at the glenohumeral joint, which appears advanced for the patient's age, with thinning of the articular cartilage and loss of space, as well as formation of prominent inferior osteophytes. Correlation with plain film is advised. No significant joint effusion.

Normal bone marrow signal.

No Hill-Sach's lesion.

### **Impression:**

1. Mild supraspinatus and infraspinatus tendinitis, but no suggestion of a tendon tear.
2. Narrowing of the subacromial space to 8mm and a suggestion of minor impingement on the rotator cuff tendons.
3. Mild degree of subacromial/subdeltoid bursitis.

4. Moderate degenerative change at the shoulder joint, which appears advanced for the patient's age and can be further assessed on plain film.

Orthopaedic review is advised.



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