

106-01 101st Ave., Ozone Park, NY 11416 Tel: 718-850-0900 | Fax: 914-462-4764

PATIENT:

DESCRIPTION:

MORRISON, CARLTON

EXAM DATE:

12/09/2021 3:36 PM

STUDY

MRI SHOULDER WITHOUT CONTRAST

MRN:

MORC53631

DOB:

08/12/1973

REFERRING PHYSICIAN: Smith, Tara

CLINICAL HISTORY C/O PAIN IN THE LT SHOULDER PAIN

DUE TO MVA

GENDER

М

MRI OF THE LEFT SHOULDER

CLINICAL HISTORY: Left shoulder pain.

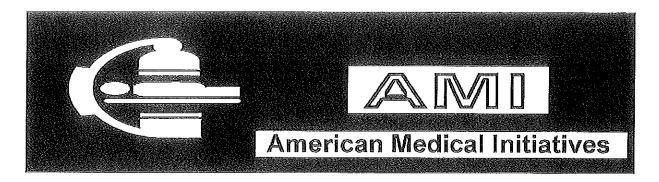
TECHNIQUE: Multiplanar and multisequential MRI of the left shoulder was obtained.

FINDINGS: There are hypertrophic changes of the acromioclavicular joint.

There is thickening and tendinopathy/tendinitis of the anterior leading fibers of supraspinatus tendon. The infraspinatus, subscapularis, and teres minor tendons are unremarkable.

There is truncation and tear of the anterior glenoid labrum. Posterior glenoid labrum is intact. The long and short heads of the biceps tendon are intact. The biceps anchor is unremarkable. There is no Hills-Sachs lesion. There is no joint effusion. There is no soft tissue mass.

IMPRESSION:



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PATIENT: MORRISON, CARLTON EXAM DATE: 12/09/2021 3:36 PM STUDY MRI SHOULDER WITHOUT CONTRAST MRN: MORC53631 DESCRIPTION: REFERRING DOB: 08/12/1973 Smith, Tara PHYSICIAN: **CLINICAL** C/O PAIN IN THE LT SHOULDER PAIN **GENDER** Μ HISTORY DUE TO MVA

- 1. Impingement morphology.
- 2. Tendinopathy/tendinitis of the anterior leading fibers of supraspinatus tendon.

Digitally Signed By: Azar, Sasan

Digitally Signed Date: 12/10/2021 9:13 AM