

RECEIVED 04/27/2022 1:50PM

To: "ROCKAWAY REHABILITATION" From: CDI Pages: 2



92-20 165<sup>TH</sup> Street, Jamaica, NY 11433  
Tel: (347) 380-5525 Fax: (347) 338-1380  
www.citimedny.com

**PATIENT NAME:** ALVAREZ, ERICK  
**DATE OF BIRTH:** 10/01/1984  
**MRN #:** JM22352  
**DATE OF SERVICE:** 04/18/2022 05:42:17 PM  
**REFERRING PHYSICIAN:** JOHN J. MCGEE, DO

**PROCEDURE: MRI OF THE LEFT SHOULDER**

**INDICATION:** S/P MVA. Date of accident: 02/10/2022. Pain

**TECHNIQUE:** Multiple pulse sequences were obtained in the coronal, sagittal and axial planes

**COMPARISON:** None

**FINDINGS:** The subcutaneous tissues are maintained.

Productive changes are noted at the acromioclavicular joint with joint effusion. Productive changes are noted at the glenohumeral joint with joint effusion.

The humeral head is intact.

The superior labrum is intact.

The biceps tendon is intact.

The subscapularis tendon is intact.

Tendinopathy is noted involving the supraspinatus tendon with partial tear of the anterior leading edge measuring 1.4 cm. The infraspinatus tendon is intact. The teres minor tendon is intact.

**IMPRESSION:**

1. Effusion at the glenohumeral joint.
2. Tendinopathy of the supraspinatus tendon with partial tear of the anterior leading edge.
3. Productive changes.

Thank you for the opportunity to participate in the care of this patient.

RECEIVED 04/27/2022 01:50PM

To: "ROCKAWAY REHABILITATION" From: CDI Pages: 2



---

92-20 165<sup>TH</sup> Street, Jamaica, NY 11433  
Tel: (347) 380-5525 Fax: (347) 338-1380  
www.citimedny.com

---

<b>PATIENT NAME:</b>	<b>ALVAREZ, ERICK</b>
<b>DATE OF BIRTH:</b>	<b>10/01/1984</b>
<b>MRN #:</b>	<b>JM22352</b>
<b>DATE OF SERVICE:</b>	<b>04/18/2022 05:42:17 PM</b>
<b>REFERRING PHYSICIAN:</b>	<b>JOHN J. MCGEE, DO</b>

A handwritten signature in dark ink, appearing to read "R. J. Denis", is written over a horizontal line.

**REGINALD J. DENIS, M.D.**  
Diagnostic Neuroradiologist

Signed by REGINALD DENIS, MD at 04/27/2022 01:44:42 PM