



# QUEENS RADIOLOGY IMAGING PC

DIAGNOSTIC RADIOLOGY

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PATIENT:	BASSAN - PIERRE, SIMONE	EXAM DATE:	09/21/2022 2:30 PM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	BASS71576
DOB:	02/07/1951	REFERRING PHYSICIAN:	Jurkovich, Michael
CLINICAL HISTORY:	N/F CASE LT SHOULDER PAIN AFTER MVA.	GENDER:	F

## MAGNETIC RESONANCE IMAGING OF LEFT SHOULDER WITHOUT CONTRAST

**HISTORY:** Left shoulder pain after motor vehicle accident.

**TECHNIQUE:** Multiplanar, multi-sequence MRI of the left shoulder was performed without intravenous contrast.

**COMPARISON:** None available.

### FINDINGS:

**OSSEOUS STRUCTURES/MARROW:** Normal marrow signal.

### ROTATOR CUFF:

**SUPRASPINATUS:** There is a partial-thickness undersurface tear of the supraspinatus tendon.

**INFRASPINATUS:** The infraspinatus tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

**TERES MINOR:** The teres minor tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

**SUBSCAPULARIS:** The subscapularis tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

**SUBACROMIAL/SUBDELTOID BURSA:** No fluid in subacromial-subdeltoid bursa to suggest bursitis.

**MUSCLES:** No muscle edema or fatty muscle atrophy.

**AC JOINT:** Mild acromioclavicular joint disease with capsular thickening and small marginal osteophytes. Lateral downsloping of the acromion with subacromial spurring. These factors contribute to rotator cuff impingement.



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**BICEPS TENDON:** Intact long-head of the biceps tendon.

**LABRUM/LIGAMENTS:** No labral tear or ligament abnormalities.

**CORACOACROMIAL LIGAMENT/ROTATOR INTERVAL:** Rotator interval is normal.

**GLENOHUMERAL CARTILAGE:** Intact articular cartilage.

**SYNOVIUM/JOINT FLUID:** There is a joint effusion

**NEUROVASCULAR STRUCTURES:** Normal in course and caliber.

**PERIPHERAL SOFT TISSUES:** Normal.

## IMPRESSION:

1. Partial-thickness undersurface tear of the supraspinatus tendon.
2. Mild acromioclavicular joint disease contributing to rotator cuff impingement.
3. Joint effusion.

Digitally Signed By: Imam, Nalyer

Digitally Signed Date: 09/23/2022 9:10 AM