



Community Medical Imaging

ACR Accredited Facility
159-16 Union Tpke • Fresh Meadows, NY 11366
Tel: 718-275-1010 • Fax: 718-591-3300

AJOY K. SINHA, M.D.
79-09 B NORTHERN BLVD.
JACKSON HEIGHTS, NY 11372

PATIENT: BRANDON FLOREZ DUQUE
DOB: 04/15/1995
DOS: 05/26/2022
CHART #: 25063
EXAM: MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Sharp pain.

TECHNIQUE: Multiplanar MR imaging of the left shoulder was performed without contrast on Hitachi open MRI unit.

Coronal T1, T2 and STIR; Sagittal T2; Axial PD and gradient echo images of the shoulder were obtained.

COMPARISON: None.

Additional sanitizing / safety protocols recommended by the CDC were performed.

FINDINGS: There is minimal fluid at the subacromial - subdeltoid bursa. There is focal T2 signal seen at the bursal surface anteriorly at the supraspinatus tendon. The subscapularis and teres minor tendons are intact.

There is type I acromion. There is no impingement or lateral downsloping. There is no muscular injury.

There is no fracture or bone bruise.

The glenoid is unremarkable. There is no subluxation. Morphology of the humeral head is unremarkable.

The anterior and posterior labra are intact. There is no attenuation. The superior labrum and biceps anchor are unremarkable.

There is no biceps tendon tear or tenosynovitis. There is no laxity or tear of the transverse humeral ligament.

The upper humerus is unremarkable.

There is no muscular injury. There is no hematoma or seroma.

There is no AC separation or fracture. Chest wall is unremarkable.



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IMPRESSION:

1. A FOCAL BURSAL SURFACE TEAR IS SEEN ANTERIORLY AT THE SUPRASPINATUS TENDON, AS NOTED.
2. TENDINITIS CHANGES ARE SEEN AT THE SUPRASPINATUS AND INFRASPINATUS TENDONS.

Thank you for referring this patient to us.

Andrew McDonnell, MD
Neuroradiologist
Diplomate, American Board of Radiology
AM/man/pr D: 05/26/2022

E-Sig By A. McDonnell, MD on 05/27/2022 06:51:53