



MULTI-POSITION MRI

STAND-UP MRI OF MANHATTAN, P.C.

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STAND-UP MRI / 3T MRI**GWENDOLYN BARTON****N10111940-
ME****Report Date: 07/16/2022****DOB: 07/17/1955****Exam Date: 07/14/2022****JOHN MCGEE DO
14 BRUCKNER BLVD
BRONX, NY 10454****MRI OF THE LEFT SHOULDER WITHOUT CONTRAST****INDICATION:** Pain, MVA**COMPARISON:** No prior study was available for comparison at the time of dictation.**TECHNIQUE:** T1, T2, and PD, axial, coronal, and sagittal sequences were obtained.**FINDINGS:**

Mild AC joint arthrosis. Lateral downsloping acromion likely causing impingement.

High-grade partial tear of the supraspinatus tendon at the insertion and critical zone with severe tendinopathy and fraying of the remainder of the tendon. Partial tear of the infraspinatus tendon at the insertion with additional tendinopathy and bursal surface fraying of the remainder of the tendon. Longitudinal interstitial tear, tendinopathy, and tenosynovitis of the long head of the biceps tendon. The biceps anchor is intact. Tendinopathy of the subscapularis tendon. Small joint effusion. Mild subacromial bursitis. Circumferential tear of the labrum.

No fracture. Bone marrow signal is normal. Glenohumeral joint narrowing with diffuse full-thickness cartilage loss and inferior osteophytes. Low marrow signal within the humeral neck, without edematous or aggressive features, likely indicating possibly from repetitive stress.

The inferior glenohumeral ligament is intact. Teres minor tendon is normal. No muscle atrophy.

IMPRESSION:

- High-grade partial tear of the supraspinatus tendon at the insertion and critical zone with severe tendinopathy and fraying of the remainder of the tendon.
- Partial tear of the infraspinatus tendon at the insertion with additional tendinopathy and bursal surface fraying of the remainder of the tendon.
- Longitudinal interstitial tear, tendinopathy, and tenosynovitis of the long head of the biceps tendon. The biceps anchor is intact.

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- Tendinopathy of the subscapularis tendon.
- Circumferential tear of the labrum.
- Small joint effusion. Mild subacromial bursitis.
- Glenohumeral joint narrowing with diffuse full-thickness cartilage loss and inferior osteophytes.
- Low marrow signal within the humeral neck, without edematous or aggressive features, likely indicating possibly from repetitive stress.

Thank you for referring your patient to us for evaluation.

Sincerely,



Priyesh Patel, MD
Certified, American Board of Radiology
Musculoskeletal and Spine Specialist
PP/ad

