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To:	Davis, Gordon	Patient Name:	Camilien, Francia
Exam:	MRI LEFT SHOULDER	DOB:	06/14/1967
Exam Date:	11/01/2022 11:09 AM	Gender:	F
Accession:	34471	MRN:	CamF7465

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**LEFT SHOULDER MRI WITHOUT CONTRAST**

**HISTORY:** Left shoulder pain status post motor vehicle accident

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

**COMPARISON:** None available.

**FINDINGS:**

**ROTATOR CUFF:** There is a high-grade partial tear at the attachment of the infraspinatus tendon with a predominantly interstitial component. There is supraspinatus and spinatus tendinitis. The subscapularis and teres minor tendons are intact.

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

**AC JOINT:** There is mild acromioclavicular joint disease. There is thickening of the acromioclavicular joint capsule and the coracoclavicular ligament which contribute to rotator cuff impingement. There is thickening and edema of the subdeltoid/subacromial bursa in keeping with bursitis.

**BICEPS TENDON:** There is tenosynovitis of the extra articular long head of the biceps tendon.

**LABRUM/LIGAMENTS:** No labral tear.

**GLENOHUMERAL CARTILAGE:** Intact articular cartilage.

**SYNOVIUM/JOINT FLUID:** No joint effusion or synovial thickening.

**MARROW:** Normal marrow signal.

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

**PERIPHERAL SOFT TISSUES:** Normal.

**IMPRESSION:**

High-grade partial tear at the attachment of the infraspinatus tendon superimposed on infraspinatus and supraspinatus tendinitis. Evidence of rotator cuff impingement secondary to



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thickening of the acromioclavicular joint capsule and the coracoacromial ligament. Associated subdeltoid/subacromial bursitis.

Tenosynovitis of the extra articular long head of the biceps tendon.

Electronically Signed by: Borukhov, David MD on 11/02/2022 9:58 AM