

## STAND-UP MRI OF THE BRONX, P.C.

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MULTI-POSITION"MRI

Accredited by the American College of Radiology

CHEVON VAUGHN

N10095625-BI

Report Date:

05/25/2022

DOB:

11/08/1980

**Exam Date:** 05/24/2022

SONIA WALKER ADAMSON DO 2426 EASTCHESTER RD BRONX, NY 10469

## MAGNETIC RESONANCE IMAGING SCAN OF THE LEFT SHOULDER

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position.

HISTORY: The patient complains of left shoulder pain with severe effect on arm movement.

INTERPRETATION Supraspinatus and infraspinatus tendons demonstrate tendinosis/tendinopathy with diffuse intrasubstance signal abnormality distally.

There is a SLAP tear extending into the anterior and posterior glenoid labra extending from the approximate 9 o'clock to 3 o'clock position. There is thickening of the ventral-inferior glenohumeral joint capsule within the proper clinical setting is consistent with adhesive capsulitis (frozen shoulder). Trace fluid within the glenohumeral joint and long head biceps tendon sheath. There is a bursal fluid collection within the subscapularis recess.

Hypertrophic changes of the AC joint and ventrally downsloping acromion which deforms the subacromial space.

Examination otherwise demonstrates the osseous structures of the shoulder to be otherwise unremarkable in signal and morphology. Muscular and tendinous structures including remaining portions of the rotator cuff are also felt to remain otherwise unremarkable in signal and morphology. The bicipital tendon otherwise appears unremarkable in position and morphology.

## IMPRESSION:

• Supraspinatus and infraspinatus tendons demonstrate tendinosis/tendinopathy with diffuse intrasubstance signal abnormality distally.

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- SLAP tear extending into the anterior and posterior glenoid labra extending from the approximate 9 o'clock to 3 o'clock position. Thickening of the ventral-inferior glenohumeral joint capsule within the proper clinical setting is consistent with adhesive capsulitis (frozen shoulder). Trace fluid within the glenohumeral joint and long head biceps tendon sheath. Bursal fluid collection within the subscapularis recess.
- Hypertrophic changes of the AC joint and ventrally downsloping acromion which deforms the subacromial space.

Sincerely,

Ronald Wagner, M.D.

Diplomate of the American Board of Radiology with added Qualifications in Neuroradiology

RW/kr