



To: Davis, Gordon
Exam: MRI RIGHT SHOULDER
Exam Date: 09/16/2022 10:49 AM
Accession: 31236

Patient Name: Miles, Renee
DOB: 09/24/1960
Gender: F
MRN: M1R6744

RIGHT SHOULDER MRI WITHOUT CONTRAST

HISTORY: Right shoulder pain status post motor vehicle accident

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

COMPARISON: None available.

FINDINGS:

ROTATOR CUFF: There is interstitial tearing at the attachment of the subscapularis tendon. There is supraspinatus, infraspinatus, and subscapularis tendinitis. The teres minor tendon is intact. There is subdeltoid/subacromial bursal edema.

MUSCLES: No muscle edema or fatty muscle atrophy.

AC JOINT: There is mild acromioclavicular joint disease with capsular thickening. There is an anteriorly curved acromion.

BICEPS TENDON: Intact long head of the biceps tendon.

LABRUM/LIGAMENTS: There is tearing of the anterosuperior to anterior glenoid labrum.

GLENOHUMERAL CARTILAGE: There is deep chondral fissuring with subchondral cystic change at the anterior glenoid.

SYNOVIUM/JOINT FLUID: There is a glenohumeral joint effusion.

MARROW: Normal marrow signal.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

Interstitial tearing at the attachment of the subscapularis tendon superimposed on subscapularis, supraspinatus, and infraspinatus tendinitis. Associated subdeltoid/subacromial bursal edema.



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Anteriorly curved acromion likely contributing to rotator cuff impingement. Mild acromioclavicular joint disease.

Tearing of the anterior superior to anterior glenoid labrum. Deep chondral fissuring with subchondral signal alteration at the adjacent anterior glenoid. Glenohumeral joint effusion.

Electronically Signed by: Borukhov, David MD on 09/18/2022 3:48 PM