)



STAND-UP MRI OF LYNBROOK, P.C.

229 Broadway • Lynbrook, NY 11563 Phone: 516.256.1558 • Fax: 516.256.0758

MULTI-POSITION MRI

Accredited by the American College of Radiology

KHAMCHAN PALTOORAM N10128703-LB Report Date: 10/06/2022

DOB:

01/08/1981

Exam Date: 10/06/2022

MICHAEL JURKOWICH MD 243-51 MERRICK BLVD ROSEDALE, NY 11422

MAGNETIC RESONANCE IMAGING SCAN OF THE LEFT SHOULDER

TECHNIQUE: Multiplanar, multisequential MRI was performed in the 30 degree tilt position.

HISTORY: The patient complains of left shoulder pain with weakness/numbness.

INTERPRETATION: The greater tuberosity is fractured and displaced laterally by 4 mm. Bone marrow edema is noted within the fracture fragment and lateral aspect of the humeral head.

Isointense signal is noted within the distal half of the supraspinatus tendon on the proton density weighted sequence. The signal does not increase on the T2 weighted sequence. The distal infraspinatus, subscapularis and teres minor tendons are intact.

The proximal biceps tendon is intact.

A minimal glenohumeral joint effusion is noted.

The marrow signal characteristics of the distal clavicle and lateral scapula are unremarkable. The acromion process is normal in position.

The muscle and fat planes are well maintained.

Axillary lymphadenopathy is not present.

IMPRESSION:

Subacute displaced greater tuberosity fracture.

Exam Date:

10/06/2022

Page 2 of 2 SHOULDER LEFTMRI 73221

- Supraspinatus tendinosis.
- Glenohumeral joint effusion.

Thank you for referring your patient to us for evaluation.

Sincerely,

Stephen Hershowitz, M.D.

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

SH/BC