



**QUEENS RADIOLOGY
IMAGING PC**
DIAGNOSTIC RADIOLOGY

1575 Hillside Ave, Suite 100
New Hyde Park, NY 11040
Tel: 516 862 8544, 516 862 8599
Cell: 516 549 6863
Fax: 516 467 3130
Email: qrlnewhydepark@yahoo.com

PATIENT:	ALLEYNE, MEKEDA	EXAM DATE:	06/13/2022 11:30 AM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	ALLM70099
DOB:	10/15/1999	REFERRING PHYSICIAN:	Jurkovich, Michael
CLINICAL HISTORY	N/F Pain due to Accident.	GENDER	F

MAGNETIC RESONANCE IMAGING OF LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Pain due to accident.

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

COMPARISON: None available.

OSSEOUS STRUCTURES/MARROW: Normal marrow signal.

ROTATOR CUFF:

SUPRASPINATUS: There is a partial-thickness undersurface tear of the supraspinatus tendon. No tendon retraction is found. No skeletal muscle atrophy is seen.

INFRASPINATUS: The infraspinatus tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

TERES MINOR: The teres minor tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

SUBSCAPULARIS: The subscapularis tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

SUBACROMIAL/SUBDELTOID BURSA: No fluid in subacromial-subdeltoid bursa to suggest bursitis.

MUSCLES: No muscle edema or fatty muscle atrophy.

AC JOINT: AC joint hypertrophy may contribute to rotator cuff impingement.

BICEPS TENDON: Intact long-head of the biceps tendon.

LABRUM/LIGAMENTS: No labral tear or ligament abnormalities.

CORACOACROMIAL LIGAMENT/ROTATOR INTERVAL: Rotator interval is normal.



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GLENOHUMERAL CARTILAGE: Intact articular cartilage.

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

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

1. Partial-thickness undersurface tear of the supraspinatus tendon.
2. AC joint hypertrophy may contribute to rotator cuff impingement.

Digitally Signed By: Imam, Nalier
Digitally Signed Date: 06/14/2022 4:38 AM