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PATIENT:	LONDON, LAWRANCE	EXAM DATE:	08/31/2022 1:34 PM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	LONL72201
DOB:	08/03/1993	REFERRING PHYSICIAN:	Phytlis, Gelb Md
CLINICAL HISTORY:	N/F CASE LT SHOULDER PAIN AFTER MVA.	GENDER:	M

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

FINDINGS:

OSSEOUS STRUCTURES/MARROW there is a benign bone cyst less than 1 cm at the greater tuberosity of the humerus. There is no fracture or dislocation or abnormal bone marrow signal or osteonecrosis

ROTATOR CUFF

SUPRASPINATUS: There is tendinopathy of the supraspinatus tendon with no tears

INFRASPINATUS: Intact TERES MINOR: Intact SUBSCAPLUARIS: _ Intact

MUSCLES: No muscle edema or fat atrophy

SUBACROMIAL/SUBDELTOID: No subacromial subdeltoid Bursitis present

AC JOINT: AC joint is normal with type III acromion and supraspinatus outlet obstruction



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BICEPS TENDON: Long head biceps tendon is normal and within the bicipital groove with

tenosynovitis present

LABRUM/LIGAMENTS: Normal labrum and ligaments

CORCOACROMIAL/ROTATOR: Normal rotator interval

GLENOHUMERAL CARTILAGE: No humeral cartilage and joint normal

SYNOVIUM/JOINT FLUID: No synovial hypertrophy or joint fluid

NEUROVASCULAR STRUCTURES: Normal in course and caliber

PERIPHERAL SOFT TISSUES: Unremarkable

IMPRESSION:

- 1. tendinopathy of the supraspinatus tendon with no tears
- 2. AC joint is normal with type III acromion and supraspinatus outlet obstruction
- 3. Long head biceps tendon is normal and within the bicipital groove with tenosynovitis present

Digitally Signed By: Izzo, Joseph

Digitally Signed Date: 09/01/2022 12:58 PM