## STAR MEDICAL IMAGING PC

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PATIENT NAME:

**DONNELL JOHNSON** 

**REFERRING PHYSICIAN:** 

**IDY LIANS** 

SERVICE:

**MRI RIGHT SHOULDER** 

DATE OF SERVICE:

10/18/2022

## MRI SCAN OF THE RIGHT SHOULDER

HISTORY: History of MVA.

TECHNIQUE: Non-contrast MRI of the right shoulder was performed utilizing multiplanar and multisequence

acquisition.

## FINDINGS:

There is AC joint arthrosis and malalignment of the AC joint with secondary impingement upon the underlying supraspinatus muscle. There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures.

There is normal fluid in the subdeltoid bursa. Minimal fluid is present within the joint capsule compatible with synovitis. There is no communication between these two fluid compartments across the conjoined tendon. There is increased signal in the myotendinous supraspinatus. There is no evidence of tendon laxity or retraction. There are no appreciable surface defects. In the given clinical setting, the findings are compatible with myotendinous supraspinatus strain/interstitial tear with associated synovitis. There is mild fluid in the subcoracoid bursa compatible with subcoracoid bursaits.

The subscapularis and biceps tendons and the biceps anchor are intact. The visualized portions of the labrum are unremarkable. There is no evidence of labral tear.

## **IMPRESSION:**

AC joint arthrosis and malalignment with impingement.

Findings compatible with myotendinous supraspinatus strain/interstitial tear with associated synovitis as discussed in the body of the report.

Mild fluid in the subcoracoid bursa compatible with subcoracoid bursitis.

The visualized portions of the labrum are unremarkable.

John D. Jonsons

Thank you for the courtesy of this consultation.

John Lyons, M.D.

Radiologist