DAMADIAN MRI IN CANARSIE, P.C.

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ANTHONY JAPP

N10109608-CA Report Date:

07/01/2022

DOB: Exam Date:

04/19/1962 06/29/2022

GORDON DAVIS, DO

1611 EAST NEW YORK AVE BROOKLYN, NY 11212-

MAGNETIC RESONANCE IMAGING OF THE RIGHT SHOULDER

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position.

HISTORY: Patient complains of right shoulder pain status post MVA.

INTERPRETATION: Signal alteration is identified within the posterior glenoid labrum (3 o'clock position) associated with intrasubstance tear. There is no evidence of tear within the anterior labrum.

Signal alteration is identified within both supraspinatus and subscapularis tendons in conjunction with tendinopathy.

There is no evidence of additional signal hyperintensities, discontinuity, or retraction associated with the supraspinatus, subscapularis, infraspinatus, or teres minor rotator cuff components to indicate rotator cuff tear. There is no evidence of atrophy associated with the rotator cuff muscular components.

Acromioclavicular hypertrophic changes are noted deforming the subacromial fat abutting the subjacent rotator cuff complex associated with impingement syndrome. Type I acromion process is noted.

Trace subcoracoid bursal effusion is noted. There is no evidence of subacromial or subdeltoid bursal effusion.

There is no evidence of humeral head or biceps tendon dislocation. There is preservation of joint space height at the glenohumeral articulation without subcortical degeneration in the humeral head or glenoid rim. Trace glenohumeral joint effusion is noted. Biceps peritendinous fluid is noted within the bicipital groove.

Bone island measuring approximately 3 mm is noted within the glenoid rim and measuring approximately 2 mm within the humeral head.

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There is no evidence of bone marrow signal changes to indicate fracture, avascular necrosis, or osteomyelitis. Nonspecific bone marrow signal changes are noted in the greater tuberosity region associated with degenerative or reactive etiology.

There is no evidence of soft tissue mass or infiltrative disorder.

IMPRESSION:

- Intrasubstance tear of the posterior glenoid labrum.
- Biceps tenosynovitis.
- Supraspinatus and subscapularis tendinopathy.
- Acromioclavicular hypertrophic changes associated with impingement syndrome.

Thank you for referring your patient to us for evaluation.

Sincerely,

Harold M. Tice, M.D.

Diplomate of the American Board of Radiology

HT/JC