



106-01 101st Ave., Ozone Park, NY 11416  
Tel: 718-850-0900 | Fax: 914-462-4764

PATIENT:	ROBINSON, DANIEL	EXAM DATE:	07/07/2022 11:20 AM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	ROBD65434
DOB:	11/05/1972	REFERRING PHYSICIAN:	Zilberman, Igor
CLINICAL HISTORY	PAIN DUE TO ACCIDENT	GENDER	M

**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:** The supraspinatus tendon maintains intact tendon fibers. 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:** Mild subluxation of the acromioclavicular joint noted with significant hypertrophy of the joint capsule.

**BICEPS TENDON:** There is tenosynovitis of the extra articular long head of the biceps tendon.



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**LABRUM/LIGAMENTS:** No labral tear or ligament abnormalities.

**CORACOACROMIAL LIGAMENT/ROTATOR INTERVAL:** Rotator interval is normal.

**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. Mild subluxation of the acromioclavicular joint with significant hypertrophy of the joint capsule.
2. Tenosynovitis of the extra articular long head of the biceps tendon.

Digitally Signed By: Imam, Naiyer  
Digitally Signed Date: 07/08/2022 11:40 PM