



Community Medical Imaging

ACR Accredited Facility
159-16 Union Tpke • Fresh Meadows, NY 11366
Tel: 718-275-1010 • Fax: 718-591-3300

PERVAIZ QURESHI, M.D.
79-09 B NORTHERN BLVD
JACKSON HEIGHTS, NY 11372

PATIENT: FELIPE A. ROMAN
DOB: 07/09/1965
DOS: 06/01/2022
CHART #: 25140
EXAM: MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Posterior pain, radiating from neck.

TECHNIQUE: Multiplanar MR imaging of the left shoulder was performed without contrast on Hitachi open MRI unit.

Coronal T1, T2 and STIR; Sagittal T2; Axial PD and gradient echo images of the shoulder were obtained.

COMPARISON: None.

Additional sanitizing / safety protocols recommended by the CDC were performed.

FINDINGS: There is minimal fluid at the subacromial-subdeltoid bursa. There is focal T2 signal noted at the midsubstance and articular surface posteriorly at the supraspinatus tendon seen on image #8 of series #5 and image #5 of series #7.

The subscapularis tendon shows mild thinning distally. The teres minor tendon is unremarkable.

There is trace joint fluid, which appears to be physiologic.

There is no muscular atrophy or injury. There is a type I acromion. There is no impingement.

The glenoid is unremarkable. There is no subluxation.

There is no fracture. There is no bone bruise. There is no osteochondral defect.

The superior labrum and biceps anchor are unremarkable. There is no biceps tendon tear or tenosynovitis. The transverse humeral ligament is unremarkable.

The anterior and posterior labra are intact.



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PAGE 2

There is no hematoma or seroma. There is no AC separation.

IMPRESSION:

1. A MIDSUBSTANCE AND ARTICULAR SURFACE TEAR IS NOTED POSTERIORLY AT THE SUPRASPINATUS TENDON, AS DESCRIBED.
2. TENDINITIS/BURSITIS CHANGES ARE SEEN AT THE SUPRASPINATUS AND INFRASPINATUS TENDONS.
3. THERE IS A PARTIAL-THICKNESS TEAR WITH ATTENUATION AT THE DISTAL 2 CM OF THE SUBSCAPULARIS TENDON. THERE IS NO SUBLUXATION.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 06/01/2022

E-Sig By A. McDonnell, MD on 06/02/2022 09:49:45