

Community Medical Imaging

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

UPENDRA SINHA, M.D. 79-09 B NORTHERN BLVD JACKSON HEIGHTS, NY 11372

PATIENT: SUZU GURUNG

DOB: 10/31/1988 . DOS: 07/01/2022 CHART #: 25294

EXAM: MRI OF THE RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Aching pain, radiating from neck and arm, worse when lifting

and standing.

COMPARISON: None.

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

TECHNIQUE: Multiplanar MR imaging of the right 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.

FINDINGS: Mild tendinosis changes are seen at the supraspinatus and infraspinatus tendons. There is increased T2 signal seen at the bursal surface anteriorly at the supraspinatus tendon. A tear is noted.

There is type I acromion. There is no impingement or lateral downsloping. There is no muscular injury.

There is no fracture or bone bruise.

The glenoid is unremarkable. There is no subluxation. Morphology of the humeral head is unremarkable.

The anterior and posterior labra are intact. There is no attenuation. The superior labrum and biceps anchor are unremarkable.

There is no biceps tendon tear or tenosynovitis. There is no laxity or tear of the transverse humeral ligament.

The upper humerus is unremarkable.

There is no muscular injury. There is no hematoma or seroma.

There is no AC separation or fracture.

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IMPRESSION:

1. A BURSAL SURFACE TEAR IS SEEN ANTERIORLY AT THE SUPRASPINATUS TENDON, AS DESCRIBED.

2. TENDINOSIS CHANGES ARE SEEN AT THE SUPRASPINATUS AND INFRASPINATUS TENDONS. THERE IS NO FRACTURE.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 07/03/2022

E-Sig By A. McDonnell, MD on 07/04/2022 20:40:20