

All County, LLC

Diagnostic Radiology

Article 28 Diagnostic & Treatment Center

Cert. No. 7003267R

07/12/22

Aleksandr Kopach, PA
430 W Merrick Road
Suite# 2
Valley Stream, NY 11580
Fax #:(516) 612-7290

Re: Uri Digmi
DOB: 05/03/1964
Pt. Tel#
Patient#: 300947

Dear Dr. Kopach:

MRI OF THE LEFT SHOULDER

Multiplanar, multisequence, multiecho MRI examination was performed through the left shoulder without intravenous contrast using a low field MRI.

The humeral head is well positioned within the glenoid. There are mild subchondral cystic changes at the inferior glenoid and possibly a small osteophyte. The articular cartilage appears grossly preserved.

There is a mildly curved, laterally downsloping acromion process causing a mild degree of subacromial impingement. The acromioclavicular joint appears intact.

There is no acute fracture, suspicious intrinsic lesion or evidence of avascular necrosis.

There is a partial tear/tendinosis of the distal supraspinatus tendon, including the footprint without retraction. The infraspinatus, teres minor and subscapularis tendons appear intact.

The muscles are unremarkable.

There is no significant fluid/synovitis of the subacromial or subdeltoid bursa. There is no significant glenohumeral joint effusion.

There is a superior labral tear. The anteroinferior and posteroinferior labrum appear grossly intact. The long head of the biceps tendon appears intact.

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MRI OF THE LEFT SHOULDER

IMPRESSION:

1. Partial tear/tendinosis of the supraspinatus tendon by the footprint without retraction.
2. Superior labral tear.
3. Mild glenohumeral joint arthrosis.
4. Mild subacromial impingement.

Thank you for this referral.

John Himelfarb, MD
ALL COUNTY, LLC
T: 07/13/2022 12:09 PM
JH/PM

Electronically approved by: John Himelfarb, MD Date: 07/18/22 15:24