

Exam requested by:
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SITE PERFORMED: ASTORIA

SITE PHONE: (718) 544-5151

Patient: MOHAMED, REDA

Date of Birth: 04-15-1973

Phone: (929) 344-9793

MRN: 6565131ARI Acc: 1017573697

Date of Exam: 01-28-2021

EXAM: MRI LEFT SHOULDER WITHOUT CONTRAST

HISTORY: left shoulder pain.

TECHNIQUE: Multiplanar, multi-sequence MRI of the left shoulder was obtained on a 3T scanner according to standard protocol.

COMPARISON: None available.

FINDINGS:

Study is mildly degraded by motion artifact.

Bones: No acute fracture or dislocation.

Rotator cuff: Low/moderate grade articular surface partial-thickness, partial width tear of the posterior supraspinatus/anterior leading-edge infraspinatus tendon measuring 0.5 cm in AP dimension. Additional low-grade bursal surface partial-thickness, partial width tear of the supraspinatus tendon anteriorly measuring 0.4 cm in AP dimension. Findings are superimposed on mild supraspinatus and infraspinatus tendinosis. Low-grade articular surface partial-thickness tear of the caudal most fibers of the subscapularis tendon. Teres minor tendon is intact. Obliteration of fat within the rotator interval.

Biceps tendon: Fluid within the biceps tendon sheath is likely related to decompressed joint fluid. Biceps tendon is intact.

Acromion: No significant acromioclavicular joint arthrosis. No os acromiale.

Bursae: Small fluid within the subacromial/subdeltoid bursa, consistent with bursitis.

Labrum: Thickening and intermediate signal at the anteroinferior labrum may related to remote tear. Mild intrasubstance degeneration at the anterosuperior and superior labrum.

Glenohumeral joint: No synovitis or effusion. No high-grade chondral defect. Thickening of the glenohumeral joint capsule.

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Muscles: Rotator cuff muscles are normal without edema or significant asymmetric fatty atrophy. Deltoid is unremarkable.

Subcutaneous tissues: Unremarkable.

Other: Prominent axillary and retropectoral lymph nodes measuring subcentimeter in short axis dimension, nonspecific.

IMPRESSION: MRI of the left shoulder demonstrates:

1. Low/moderate grade articular surface partial-thickness, partial width tear of the posterior supraspinatus/anterior leading-edge infraspinatus tendon. Additional low-grade bursal surface partial-thickness, partial width tear of the supraspinatus tendon anteriorly. Findings are superimposed on mild supraspinatus and infraspinatus tendinosis.
2. Low-grade articular surface partial-thickness tear of the caudal most fibers of the subscapularis tendon.
3. Mild subacromial/subdeltoid bursitis.
4. Thickening and intermediate signal at the anteroinferior labrum may related to remote tear.
5. Obliteration of fat within the rotator interval. Thickening of the glenohumeral joint capsule. Findings may be seen in the clinical setting of adhesive capsulitis.

Thank you for the opportunity to participate in the care of this patient.

PAUL-MICHEL F DOSSOUS MD - *Electronically Signed: 01-29-2021 1:43 PM*
Physician to Physician Direct Line is: (646) 902-3709

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