

New York Medical & Diagnostic Care P.C.
204-16 Hillside Avenue
Hollis, NY 11423
718-740-9200/718-740-9211 FAX

PATIENT NAME: Allison, Jerrick
DATE OF BIRTH: 3/23/57
REFERRING PHYSICIAN: Dr. Phyllis Gelb
DATE OF EXAM: 8/26/22

MRI OF THE RIGHT SHOULDER:

TECHNIQUE: Coronal oblique and axial images of the right shoulder were performed using spin echo and gradient pulse sequences.

CLINICAL HISTORY: Shoulder pain.

FINDINGS: There is AC joint narrowing with acromion spurring. The glenohumeral joint is intact. There is impingement is noted. The rotator cuff musculature including the supraspinatus, subscapularis, infraspinatus and teres minor are normal in size without evidence of atrophy or fatty infiltration. The tendons of the rotator cuff reveal tendinosis/tendonitis with intrasubstance tearing of the supraspinatus, infraspinatus and subscapularis portion of the cuff. The teres minor tendons are intact. There is synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.


There is no subacromial/subdeltoid glenohumeral joint effusion.

The posterior labrum is partially torn and rotated. The biceps tendon is hypoplastic and torn. The marrow signal is homogeneous. No subluxations are identified.

IMPRESSION:

1. Impingement.
2. AC joint narrowing with acromion spurring.
3. The biceps tendon is hypoplastic and torn. The posterior labrum is partially torn and rotated.
4. Synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.
5. Tendinosis/tendonitis with intrasubstance tearing of the supraspinatus, infraspinatus and subscapularis portion of the cuff.

Thank you for the courtesy of this consultation.



Robert D. Solomon, M.D.
Board Certified Radiologist

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