

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: GLADYS D. REYES

DOB: 12/05/1971 DOS: 07/12/2022 CHART #: 25352

EXAM: MRI OF THE RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Frontal posterior pain, limited motion.

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.

COMPARISON: None.

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

FINDINGS: There is slight enlargement of the supraspinatus and infraspinatus tendons.

Musculotendinous junction is unremarkable. There is slight irregularity of the bursal surface posteriorly at the supraspinatus tendon.

The subscapularis and teres minor tendons are unremarkable.

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.



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

IMPRESSION:

1. A BURSAL SURFACE TEAR IS SEEN POSTERIORLY AT THE SUPRASPINATUS TENDON, AS NOTED.

2. TENDINITIS CHANGES ARE SEEN AT THE SUPRASPINATUS AND INFRASPINATUS TENDONS.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 07/12/2022

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E-Sig By A. McDonnell, MD on 07/13/2022 06:55:20