



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: MARIA DEL ROSARIO HUAMAN AVILA
DOB: 05/27/1971
DOS: 08/17/2022
CHART #: 25591
EXAM: MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Frontal posterior pain.

TECHNIQUE: Multiplanar MR imaging of the left 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 tendon anteriorly. Supraspinatus and infraspinatus tendons are intact. The subscapularis tendon shows slight disorganization at the upper aspect. The teres minor tendon is 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.

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

State-of-the-Art Imaging Facility



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There is no AC separation or fracture.

IMPRESSION:

1. A TEAR IS SEEN AT THE SUBSCAPULARIS TENDON AT THE UPPER ASPECT. THERE IS NO ATTENUATION.
2. MILD 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: 08/17/2022

E-Sig By A. McDonnell, MD on 08/18/2022 06:56:19