



30-80 31st Street, Astoria, NY 11102
Tel: 718-335-7100 | Fax: 718-709-4136

PATIENT:	MIESES, LEANDRO	EXAM DATE:	03/08/2022 12:55 PM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	MIEL57137
DOB:	05/07/1987	REFERRING PHYSICIAN:	Phyllis, Gelb Md
CLINICAL HISTORY	C/O OF RIGHT SHOULDER PAIN DUE TO MVA	GENDER	M

MAGNETIC RESONANCE IMAGING OF RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Right shoulder pain due to motor vehicle accident .

TECHNIQUE: Multiplanar, multi-sequence MRI of the right shoulder was performed without intravenous contrast.

COMPARISON: None available.

OSSEOUS STRUCTURES/MARROW: Normal marrow signal.

ROTATOR CUFF:

SUPRASPINATUS: There is increased T2 signal in the musculotendinous junction compatible with supraspinatus tendinitis. No skeletal muscle atrophy is seen.

INFRASPINATUS: The infraspinatus tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

TERES MINOR: The teres minor tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

SUBSCAPULARIS: There is increased T2 signal in the musculotendinous junction compatible with subscapularis tendinitis. No skeletal muscle atrophy is seen.

SUBACROMIAL/SUBDELTOID BURSA: Mild fluid in subacromial-subdeltoid bursa compatible with bursitis or may be seen with full thickness rotator cuff tear.

MUSCLES: No muscle edema or fatty muscle atrophy.

AC JOINT: AC joint hypertrophy may contribute to rotator cuff impingement.

BICEPS TENDON: Intact long-head of the biceps tendon.

LABRUM/LIGAMENTS: No labral tear or ligament abnormalities/



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CORACOACROMIAL LIGAMENT/ROTATOR INTERVAL: Rotator Interval is normal.

GLENOHUMERAL CARTILAGE: Intact articular cartilage.

SYNOVIUM/JOINT FLUID: No joint effusion or synovial thickening.

NEUROVASCULAR STRUCTURES: Normal in course and caliber

PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

1. Increased T2 signal in the musculotendinous junction of supraspinatus and subscapularis compatible with tendinitis.
2. Mild fluid in subacromial-subdeltoid bursa compatible with bursitis or may be seen with full thickness rotator cuff tear.
3. AC joint hypertrophy may contribute to rotator cuff impingement.

Digitally Signed By: Imam, Naiyer
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