1575 Hillside Ave, Suite 100 New Hyde Park, NY 11040 Tel: 516 962 9544, 516 962 9599 Cell: 516 549 6963 Fax: 516 467 3130 Emall: qrl.newhydepark@yahoo.com

07/27/2022 11:30 AM **EXAM DATE:** PATIENT: LOWE, DUDLEY LOWD71574 MRI SHOULDER MRN: STUDY DESCRIPTION: WITHOUT CONTRAST Jurkowich, Michael DOB: 11/05/1970 REFERRING PHYSICIAN: M CLINICAL HISTORY: N/F Pain after MVA. GENDER:

MAGNETIC RESONANCE IMAGING OF LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Pain after motor vehicle accident.

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

COMPARISON: None available.

FINDINGS:

OSSEOUS STRUCTURES/MARROW: Normal marrow signal.

ROTATOR CUFF:

SUPRASPINATUS: A full thickness tear of the anterior fibers of the supraspinatus tendon noted with no retraction.

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

SUBACROMIAL/SUBDELTOID BURSA: No fluid in subacromial-subdeltoid bursa to suggest bursitis.

MUSCLES: No muscle edema or fatty muscle atrophy.

AC JOINT: Intact.

BICEPS TENDON: There is tenosynovitis of the extra articular long head of the biceps tendon.

LABRUM/LIGAMENTS: No labral tear or ligament abnormalities.

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STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	LOWD71574
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CLINICAL HISTORY:	N/F Pain after MVA.	GENDER:	M

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. Full thickness tear of the anterior fibers of the supraspinatus tendon with no retraction.
- 2. Tenosynovitis of the extra articular long head of the biceps tendon.

Digitally Signed By: Imam, Naiyer

Digitally Signed Date: 07/28/2022 10:32 AM