

# SKY RADIOLOGY

PATIENT NAME FAISON, SADE  
D.O.B. 04/02/1996  
PATIENT # 0000013528  
DATE OF SERVICE 5/4/2022 9:23:19 AM  
REF. PHYSICIAN RAHMAN, QUAZI MD

## MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

INDICATION: MVA. Left shoulder pain

COMPARISON: No prior study was available for comparison at the time of dictation.

TECHNIQUE: T1, T2, and PD, axial, coronal, and sagittal sequences were obtained.

### FINDINGS:

No fracture or suspicious lesion. No os acromiale or intra-articular loose body. No evidence of significant arthritis and glenohumeral cartilage grossly intact.

There is a low-lying acromion also impinging on predominantly supraspinatus, with bursal surface tear toward the anterior insertional fibers. Series 5 image 11. AC joint mild arthrosis and mild subacromial bursitis.

Intact labrum. Small free fluid in the subcoracoid recess with mild increased intratendinous and myotendinous signal of the subscapularis. Increased signal within the superior glenohumeral ligament. Biceps tendinopathy proximal peritendinous fluid. Intact bicipital labral anchor complex.

The inferior glenohumeral ligament is intact. Teres minor tendon is normal. No muscle atrophy.

No significant effusion. No intra-articular loose body.

### IMPRESSION:

1. Suggestive shoulder impingement predominantly on the supraspinatus, with bursal surface tear toward the anterior insertional fibers. Series 5 image 11. AC joint mild arthrosis and mild subacromial bursitis.

2. Biceps tendinopathy. Small free fluid in the subcoracoid recess with subscapularis tendinosis and sprain of the superior glenohumeral ligament.

SKY RADIOLOGY P.C.

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Thank you for this kind referral of this patient.

*B.V. Reddy MD*

B.V. Reddy M.D.  
Diagnostic Radiologist and Nuclear Medicine Physician  
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Electronically Signed by REDDY, B.V. MD DR. at 5/10/2022 12:06:35 AM