STAND-UP MRI OF BENSONHURST, P.C.
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MULTI-POSITION™MRI

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ADAM BARR **BK2102247** **Report Date:** 08/06/2021
DOB: 04/15/1976
Exam Date: 08/04/2021

AJOY SINHA, MD
1314 CONEY ISLAND AVE
BROOKLYN, NY 11230

MAGNETIC RESONANCE IMAGING OF THE RIGHT SHOULDER

TECHNIQUE: Multiplanar, multisequential MRI was performed in the recumbent position.

HISTORY: The patient complains of right shoulder pain with numbness and weakness due to work injury.

INTERPRETATION: The supraspinatus and infraspinatus tendons demonstrate tendinosis/tendinopathy with diffuse intrasubstance signal abnormality distally.

There is a tear and sublabral recess anterior-superior glenoid labrum extending from the approximate 2:00 to 3:00 position. Trace fluid within the glenohumeral joint and subscapularis recess.

Hypertrophic changes of the AC joint and low-lying acromion with abutment of the bursal surface of the rotator cuff.

Examination otherwise demonstrates the osseous structures of the shoulder to be otherwise unremarkable in signal and morphology. Muscular and tendinous structures including remaining portions of the rotator cuff are also felt to remain otherwise unremarkable in signal and morphology. The bicipital tendon otherwise appears unremarkable in position and morphology.

IMPRESSION:

- Supraspinatus and infraspinatus tendons demonstrate tendinosis/tendinopathy with diffuse intrasubstance signal abnormality distally.
- Tear and sublabral recess anterior-superior glenoid labrum extending from the approximate 2:00 to 3:00 position.
- Trace fluid within the glenohumeral joint and subscapularis recess.

- Hypertrophic changes of the AC joint and low-lying acromion with abutment of the bursal surface of the rotator cuff.

Thank you for referring your patient to us for evaluation.

Sincerely,

Ronald Wagner MD

Ronald Wagner, M.D.
Diplomate of the American Board of Radiology
with added Qualifications in Neuroradiology
RW/lf