

**AMI****American Medical Initiatives**

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

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|---------------------------|-----------------------------------------|-----------------------------|--------------------|
| PATIENT: | JEAN-BAPTISTE, EMMA | EXAM DATE: | 03/18/2022 6:41 PM |
| STUDY DESCRIPTION: | MRI SHOULDER WITHOUT CONTRAST | MRN: | JEAE58431 |
| DOB: | 04/20/2002 | REFERRING PHYSICIAN: | Qureshi, Adnan |
| CLINICAL HISTORY | pain in both shoulders after mva injury | GENDER | F |

MAGNETIC RESONANCE IMAGING OF LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Pain in both shoulders after motor vehicle accident Injury.

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

COMPARISON: None available.

OSSEOUS STRUCTURES/MARROW: Normal marrow signal.

ROTATOR CUFF:

SUPRASPINATUS: The supraspinatus tendon maintains intact tendon fibers. No tendon retraction is found. 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 tendonitis. Associated mild fluid noted in the superior subscapular recess.

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: Mild subluxation of the acromioclavicular joint noted with significant hypertrophy of the joint capsule.

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

LABRUM/LIGAMENTS: No labral tear or ligament abnormalities.

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. Mild fluid in subacromial-subdeltoid bursa compatible with bursitis or may be seen with full thickness rotator cuff tear.
2. Subluxation of the acromioclavicular joint as described.
3. Tenosynovitis of the extra articular long head of the biceps tendon.
4. Subscapularis tendonitis with associated mild fluid in the superior subscapular recess.

Digitally Signed By: Imam, Naiyer
Digitally Signed Date: 03/19/2022 10:05 AM