

SKY RADIOLOGY

PATIENT NAME	BATISTA, TEOFILO
D.O.B.	05/08/1994
PATIENT #	2030
DATE OF SERVICE	10/14/2022
REF. PHYSICIAN	KOPACH, ALEXANDR MD

MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

INDICATION: 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, but there is AC joint arthrosis with type II acromion morphology. No evidence of significant glenohumeral arthritis and glenohumeral cartilage grossly intact.

Tendinosis with bursal surface tearing supraspinatus and anterior infraspinatus over an area measuring 18 mm AP dimension.

Intact labrum. The subscapularis tendon is normal. Intact bicipital labral anchor complex, but there is tendinosis proximal biceps tendon.

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

No significant effusion. Mild subacromial/subdeltoid bursitis.

IMPRESSION:

1. AC joint arthrosis with type II acromial morphology and adjacent subacromial subdeltoid bursitis.
2. Tendinosis with bursal surface tearing involving the supraspinatus and anterior infraspinatus, over an area measuring 18 mm AP dimension
3. Tendinosis proximal biceps tendon.

SKY RADIOLOGY P.C.
210-12 NORTHERN BLVD, BAYSIDE, NY 11361 * TEL 718-224-8800 * FAX 718-224-8822

SKY RADIOLOGY

PATIENT NAME	BATISTA, TEOFILO
D.O.B.	05/08/1994
PATIENT #	2030
DATE OF SERVICE	10/14/2022
REF. PHYSICIAN	KOPACH, ALEXANDR MD

Thank you for this kind referral of this patient.

B.V. Reddy MD

B.V. Reddy M.D.
Diagnostic Radiologist and Nuclear Medicine Physician
Diplomat of ABNM and ABR
MRI and Breast Imaging Specialist

Electronically Signed by REDDY, B.V. MD DR. at 10/23/2022 10:28:08 PM

SKY RADIOLOGY P.C.
210-12 NORTHERN BLVD, BAYSIDE, NY 11361 * TEL 718-224-8800 * FAX 718-224-8822