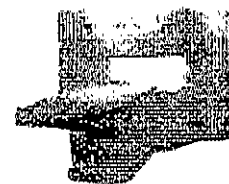


**Nova Medical Diagnostic, PC**

8317 Ave N • Brooklyn, NY 11234
Tel: 718-676-7828 • Fax: 718-676-7829



DENNY X. RODRIGUEZ, M.D.
4720 AVENUE N
BROOKLYN, NY 11234

PATIENT: TIFFANY BLACK-DONALD
DOB: 12/24/1976 DOS: 09/06/2022 CHART #: 4197
EXAM: MRI OF THE LEFT SHOULDER WITHOUT CONTRAST

HISTORY: Shoulder pain, clicking, limited range of motion.

TECHNIQUE: Multiplanar MR imaging of the left shoulder was performed without contrast on Hitachi open MRI unit.

Coronal T1, T2 and STIR; Sagittal T2; Axial PD and gradient echo images of the shoulder were obtained.

COMPARISON: None.

FINDINGS: No bone marrow edema, bony lesion or fracture identified.

There are subchondral changes and osteophyte formation in the acromioclavicular joint.

There is fluid surrounding the long head of the biceps tendon suggesting tenosynovitis.

There is increased signal in the distal aspect of the supraspinatus tendon with presence of fluid consistent with a full-thickness tear. There is approximately 1 cm tendon retraction.

The infraspinatus tendon and subscapularis tendon are normal in signal and appearance.

The glenoid labrum demonstrates no abnormality.

The rotator cuff muscles are normal in signal and appearance.

IMPRESSION:

1. FINDING SUGGESTING A FULL-THICKNESS TEAR OF THE SUPRASPINATUS TENDON WITH APPROXIMATELY 1 CM TENDON RETRACTION.



Nova Medical Diagnostic, PC

6317 Ave N • Brooklyn, NY 11234
Tel: 718-676-7828 • Fax: 718-676-7829



PATIENT: TIFFANY BLACK-DONALD
DOB: 12/24/1976 DOS: 09/06/2022 CHART #: 4197
EXAM: MRI OF THE LEFT SHOULDER WITHOUT CONTRAST
PAGE 2

2. TENOSYNOVITIS OF THE LONG HEAD OF THE BICEPS TENDON.

Thank you for referring this patient to us.

G. Amoachi

Guenadi Amoachi, MD
Diagnostic Radiologist
Diplomate, American Board of Radiology

E-Sig By G. Amoachi, MD on 09/08/2022 08:05:50