

New York Medical & Diagnostic Care P.C.
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PATIENT NAME: Johnson, Ramoy
DATE OF BIRTH: 11/29/02
REFERRING PHYSICIAN: Dr. Phyllis Gelb
DATE OF EXAM: 8/16/22

MRI OF THE LEFT SHOULDER:

TECHNIQUE: Coronal oblique and axial images of the left shoulder were performed using spin echo and gradient pulse sequences.

CLINICAL HISTORY: Shoulder pain.

FINDINGS: The AC and glenohumeral joints are intact. Impingement is noted. The rotator cuff musculature including the supraspinatus, subscapularis, infraspinatus and teres minor are normal in size without evidence of atrophy or fatty infiltration. The tendons of the rotator cuff reveal tendinosis/tendonitis with intrasubstance cuff tearing of the supraspinatus and infraspinatus portions of the cuff. The subscapularis and teres minor tendon are intact. There is synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.

There is a glenohumeral joint effusion.

The anterior and posterior labrum are partially torn and avulsed. The biceps tendon is hypoplastic. The marrow signal is homogeneous. No subluxations are identified.

IMPRESSION

1. Tendinosis/tendonitis with intrasubstance cuff tearing of the supraspinatus and infraspinatus portions of the cuff.
2. Synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.
3. Impingement.
4. Glenohumeral joint effusion.
5. The anterior and posterior labrum are partially torn and avulsed. The biceps tendon is hypoplastic.

Thank you for the courtesy of this consultation.



Robert D. Solomon, M.D.
Board Certified Radiologist

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