



STAND-UP MRI OF LYNBROOK, P.C.

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MULTI-POSITION MRI

Accredited by the American College of Radiology

GLORIA CLARKE

N10111580-LB

Report Date: 07/22/2022

DOB: 01/15/1954

Exam Date: 07/22/2022

MICHAEL JURKOWICH MD

243-51 MERRICK BLVD

ROSEDALE, NY 11422

MAGNETIC RESONANCE IMAGING OF THE LEFT SHOULDER

TECHNIQUE: Multiplanar, multisequential MRI was performed in the 30-degree tilt position.

HISTORY: The patient complains of left shoulder pain and limited range of motion.

INTERPRETATION: There is a partial articular surface tear of the distal supraspinatus tendon with tendinosis. No tendon retraction. The infraspinatus and subscapularis tendons are intact.

Biceps labral anchor, labrum, intraarticular long head biceps tendons, glenohumeral ligaments, and capsule are intact.

Lateral downsloping acromion. Subchondral cystic change at the greater tuberosity. No Hill-Sachs deformity or intraosseous lesion.

No subacromial/subdeltoid bursal or glenohumeral joint effusions seen. No abnormal muscle signal intensity, atrophy, or soft tissue mass.

IMPRESSION:

- Partial articular surface tear of the supraspinatus tendon insertion with tendinosis.
- Lateral downsloping acromion.
- Fibrocystic change at the greater tuberosity.

Thank you for referring your patient to us for evaluation.

Sincerely,

GLORIA CLARKE

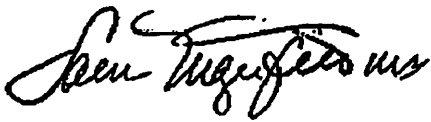
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Page 2 of 2

SHOULDER LEFT MRI 73221

A handwritten signature in black ink, appearing to read "Sam Mayerfield MD". The signature is fluid and cursive, with the letters "S", "M", and "D" being particularly prominent.

Samuel Mayerfield, MD
Diplomate of the American Board of Radiology
with Added Qualifications in Neuroradiology
SM/mf