



COMMUNITY MEDICAL IMAGING

OF BROOKLYN

ACR Accredited Facility

2102 Ave Z • Brooklyn, NY 11235 • Tel: 718-455-4444 • Fax: 718-615-2121

GREGORY ABRAMOV, N.P.
1314 CONEY ISLAND AVENUE
BROOKLYN, NY 11230

PATIENT: AMANDA ST. HILL
DOB: 02/12/1988
DOS: 04/12/2022
CHART #: 24800
EXAM: MRI OF THE RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Pain.

TECHNIQUE: Multiplanar MR imaging of the right 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.

Additional sanitizing / safety protocols recommended by the CDC were performed.

FINDINGS: There is moderate fluid seen at the subacromial - subdeltoid bursa. This is more focal anteriorly. There is T2 signal at the bursal surface anteriorly at the supraspinatus tendon. There is no attenuation. Myotendinous junction is unremarkable.

The subscapularis and teres minor tendons are intact.

There is a type I acromion. There is no impingement. The musculotendinous junction is unremarkable. There is no muscular injury.

There is no fracture. There is no bone bruise. There is no osteochondral defect.

The glenoid is unremarkable. There is no subluxation.

The anterior and posterior labra are intact. The superior labrum and biceps anchor are unremarkable.

There is no biceps tendon tear or tenosynovitis. The transverse humeral ligament is unremarkable.

There is no muscular injury. There is no hematoma or seroma.



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The upper humerus is unremarkable.

There is no AC separation.

Limited visualization of the chest wall is unremarkable.

IMPRESSION:

1. A BURSAL SURFACE TEAR IS SEEN ANTERIORLY AT THE SUPRASPINATUS TENDON, AS DESCRIBED.
2. MILD TENDINITIS CHANGES ARE SEEN AT THE SUPRASPINATUS AND INFRASPINATUS TENDONS.

Thank you for referring this patient to us.

Andrew McDonnell, MD

Neuroradiologist

Diplomate, American Board of Radiology

AM/man/pr D: 04/12/2022

E-Sig By A. McDonnell, MD on 04/13/2022 08:52:17