



596 Anderson Avenue • Suite 120 • Cliffside Park, New Jersey 07010
Tel: (201) 945- MRI 7 • Fax: (201) 945-1466

PATIENT NAME: BRYAN, SANDRA
PATIENT DOB: 04/07/1967
CHART NUMBER: 044831
EXAM DATE: APRIL 01, 2022
REFERRING PHYSICIAN: DR.KOPACH, ALEKSANDR

MRI OF THE LEFT SHOULDER

Clinical History: Pain; s/p injury.

Protocol: T1 and T2 axial and sagittal images

Findings: The acromioclavicular joint is intact. There is subacromial spur present, which may be impinging upon the supraspinatus muscle tendon complex.

There is increased signal in the supraspinatus tendon consistent with tendinosis with a partial tear of the distal bursal surface. The infraspinatus tendon is intact with tendinosis. The subscapularis tendon is grossly intact.

The humerus is heterogeneous with cystic changes in the superolateral aspect and heterogeneous low signal particularly in the superomedial aspect, which may be post-traumatic, non-displaced fracture type injury.

The long head of the biceps tendon is normally situated in the bicipital groove. The inferior glenohumeral ligamentous complex is intact. There is no definite evidence of acute labral tear. The visualized musculature is normal in signal intensity.

IMPRESSION:

1. INTACT ACROMIOCLAVICULAR JOINT WITH UNDERSURFACE HYPERTROPHY IMPINGING UPON THE SUPRASPINATUS MUSCLE TENDON COMPLEX.
2. TENDINOSIS OF THE SUPRASPINATUS AND INFRASPINATUS TENDONS WITH PARTIAL TEAR OF THE DISTAL BURSAL SURFACE OF THE SUPRASPINATUS TENDON.
3. HETEROGENEOUS SIGNAL IN THE HUMERAL HEAD MOST LIKELY POST-TRAUMATIC CHANGES. PLAIN FILM CORRELATION RECOMMENDED.

Thank you for the courtesy of this referral.

**** Electronically Signed ****

Charles DeMarco, M.D.

Diplomate, American Board of Radiology