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> Patient: MARTINEZ,BONIFACIO Date of Birth: 05-06-1967 Phone: (347) 600-9948

MRN: K128486 Acc: KR182926 Date of Exam: 02-25-2022

Exam requested by: MILAN SEN MD 55 East Old Country Road Hicksville New York 11801

EXAM: MRI-SHOULDER WITHOUT CONTRAST RIGHT

TECHNIQUE: Coronal proton density and coronal proton density fat saturated images as well as sagittal proton density fat saturated images and axial proton density T1 and fat saturated images were obtained in a3 Tesla Magnet.

INDICATIONS: Status post trauma

FINDINGS: There is a high-grade partial versus complete non retracted tear of both supraspinatus and infra spinatus tendons extending to the distal insertion.

There is a partial tear of the anterior superior distal insertion of the sub scapularis tendon.

There are hypertrophic changes at the acromioclavicular joint with no significant impingment upon the supraspinatus musculotendinous junction.

The marrow signal is normal with no fracture or osteochondral defect

There is no os acromiale.

The extra-articular segment of the biceps tendon is normally located and intact.

There is a tear of the anterior superior labrum with associated joint and subcoracoid bursal effusion.

IMPRESSION: High-grade partial versus complete non retracted rotator cuff tear involving the supraspinatus and infra spinatus tendons extending to the distal insertion.

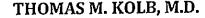
Partial tear of the anterior superior distal insertion of the sub scapularis tendon.

Tear of the anterior superior labrum with associated joint and subcoracoid bursal effusion

Thank you for the opportunity to participate in the care of this patient.

Kolb, Thomas Electronically Signed: 02-27-2022 11:20 AM

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MRN: K128486 Acc: KR182927 Date of Exam: 02-25-2022

IMPRESSION: Flap tear of the inferior <u>articular surface of the posterior horn medial meniscus</u> extending into the body of the meniscus. There is posterior capsular disruption with soft tissue edema and a 2 centimeter thin popliteal cyst.

Intra substance tear of the posterior horn of the lateral meniscus.

Moderate to high-grade partial tear of the anterior cruciate ligament.

There is a 2 centimeter osteochondral defect at the anterior aspect of the lateral femoral condyle extending into the trochlea.

There is a 1 centimeter osteochondral defect at the anterior aspect of the medial femoral condyle.

There is also 1.5 centimeter osteochondral defect at the lateral patellar facet with associated soft tissue edema and adjacent partial tear of the lateral patellar retinaculum.

Prepatellar and infrapatellar soft tissue edema. Joint effusion

Thank you for the opportunity to participate in the care of this patient.

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