

30-80-31st Street, Astoria; NY 11102 Tel: 718-335-7100 | Fax: 718-709-4136

PATIENT:

DESCRIPTION:

GARCIA, VICKIE I

EXAM DATE:

06/22/2022 4:45 PM

STUDY

MRI SHOULDER WITHOUT CONTRAST

MRN:

GARV66664

DOB:

02/01/1990

REFERRING PHYSICIAN:

Qureshi, Adnan

CLINICAL HISTORY

C/O RT-SHOULDER PAIN DUE TO MVA

GENDER

F

MAGNETIC RESONANCE IMAGING OF RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Complains of right shoulder pain due to motor vehicle accident.

TECHNIQUE: Multiplanar, multi-sequence MRI of the right shoulder was performed without intravenous contrast.

COMPARISON: None available.

OSSEOUS STRUCTURES/MARROW: Normal marrow signal.

ROTATOR CUFE:

SUPRASPINATUS: The supraspinatus tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

INFRASPINATUS: The infraspinatus tendon maintains intact tendon fibers. No tendon retraction is found, No skeletal muscle atrophy is seen.

TERES MINOR: The teres minor tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

SUBSCAPULARIS: The subscapularis tendon maintains intact tendon fibers. No tendon retraction is found. No skeletal muscle atrophy is seen.

SUBACROMIAL/SUBDELTOID BURSA: . Mild fluid in subacromial-subdeltoid bursa compatible with bursitis or may be seen with full thickness rotator cuff tear.

MUSCLES: No muscle edema or fatty muscle atrophy.

ACJOINT: Intact.

BICEPS TENDON: Intact long-head of the biceps tendon.



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LABRUM/LIGAMENTS: There is a tear of the superior glenoid labrum anterior to posterior (SLAP tear) with a partial tear of the biceps labral anchor complex.

CORACOACROMIAL LIGAMENT/ROTATOR INTERVAL: Rotator interval is normal.

GLENOHUMERAL CARTILAGE: Intact articular cartilage.

SYNOVIUM/JOINT FLUID: No joint effusion or synovial thickening.

NEUROVASCULAR STRUCTURES: Normal in course and caliber.

PERIPHERAL SOFT TISSUES: Normal.

IMPRESSION:

1. Mild fluid in subacromial-subdeltoid bursa compatible with bursitis or may be seen with full thickness rotator cuff tear.

2. Type II SLAP tear.

Digitally Signed By: Imam, Naiyer

Digitally Signed Date: 06/23/2022 1:14 PM

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