

STAR MEDICAL IMAGING PC

141 E. Merrick Road Valley Stream, NY, 11580
Phone:(516) 604-0707 Fax:(516) 399-1100

PATIENT NAME: ALLAN LINDOR
REFERRING PHYSICIAN: CATHY DELERME-PAGAN
SERVICE: MRI LEFT SHOULDER
DATE OF SERVICE: 10/07/2022

MRI SCAN OF THE LEFT SHOULDER

HISTORY: History of MVA.

TECHNIQUE: Non-contrast MRI of the left shoulder was performed utilizing multiplanar and multisequence acquisition.

FINDINGS:

There is malalignment of the AC joint with impingement upon the underlying supraspinatus muscle. The visualized osseous structures are intact. There is no evidence of fracture, dislocation, or bone marrow abnormalities to be suspicious for bone contusions, stress fractures, or acute trabecular microfractures.

There is normal fluid in the subdeltoid bursa as well as normal fluid in the joint capsule. There is no communication between these two fluid compartments across the conjoined tendon. There is increased signal in the myotendinous supraspinatus. There is no evidence of tendon laxity or retraction. There are no appreciable surface defects. In the given clinical setting, the findings are compatible with myotendinous supraspinatus strain/interstitial tear. There is minimal fluid in the subcoracoid bursa compatible with subcoracoid bursitis.

There is increased signal in the myotendinous subscapularis. There is no evidence of retraction or laxity. The finding is compatible with a strain/interstitial tear of this structure. The subscapularis and biceps tendons and the biceps anchor are otherwise intact.

The visualized portions of the labrum are unremarkable. There is no evidence of labral tear.

IMPRESSION:

Malalignment of the AC joint with impingement.

Findings compatible with strains/interstitial tears of the myotendinous supraspinatus and myotendinous subscapularis as discussed in the body of the report.

Minimal fluid in the subcoracoid bursa compatible with subcoracoid bursitis.

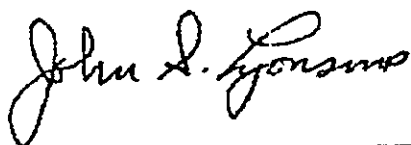
The visualized portions of the labrum appear unremarkable.

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Thank you for the courtesy of this consultation.



John Lyons, M.D.

Radiologist