## New York Medical & Diagnostic Care P.C. 204-16 Hillside Avenue **Hollis, NY 11423** 718-740-9200/718-740-9211 FAX

PATIENT NAME:

McDonald, Denor

DATE OF BIRTH:

11/21/91

**REFERRING PHYSICIAN: Dr. Joseph Martone** 

DATE OF EXAM:

9/14/22

## MRI OF THE LEFT SHOULDER:

TECHNIQUE: Coronal oblique and axial images of the left shoulder were performed using spin echo and gradient pulse sequences.

CLINICAL HISTORY: Shoulder pain.

FINDINGS: There is AC joint narrowing and acromion spurring. The glenchumeral joint is intact. Impingement is noted. The rotator cuff musculature including the supraspinatus, subscapularis, infraspinatus and teres minor are normal in size without evidence of atrophy or fatty infiltration. The tendons of the rotator cuff reveal tendinopathy with tendinosis/tendonitis of the supraspinatus, subscapularis and infraspinatus portion of the cuff. The teres minor tendon is intact. There is synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.

There is no subacromial/subdeltoid glenohumeral joint effusion.

There is anterior and posterior labrum is hypoplastic. The biceps tendon is partially torn. The marrow signal is homogeneous. No subluxations are identified.

## **IMPRESSION:**

- 1. Impingement.
- 2. The tendons of the rotator cuff are tendinopathic with tendinosis/tendonitis of the supraspinatus, subscapularis and infraspinatus portion of the cuff.
- 3. Hypoplastic labrum. The biceps tendon is partially torn.
- 4. AC joint narrowing and acromion spurring.
- 5. Synovitis of the patulous axillary pouch of the inferior glenohumeral ligament.

Thank you for the courtesy of this consultation.

Robert D. Solomon, M.D.

**Board Certified Radiologist** 

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