



40-34 74th Street, Elmhurst, NY 11373
Tel: 718-335-7100 | Fax: 718-709-4136

PATIENT:	LYTON, SAMANTHA	EXAM DATE:	06/25/2022 11:17 AM
STUDY DESCRIPTION:	MRI SHOULDER WITHOUT CONTRAST	MRN:	SAML69619
DOB:	08/31/2001	REFERRING PHYSICIAN:	Zilberman, Igor DC
CLINICAL HISTORY:	NF: PAIN DUE TO ACCIDENT		

MAGNETIC RESONANCE IMAGING OF RIGHT SHOULDER WITHOUT CONTRAST

HISTORY: Pain due to 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 CUFF:

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: No fluid in subacromial-subdeltoid bursa to suggest bursitis.

MUSCLES: No muscle edema or fatty muscle atrophy.

AC JOINT: AC joint hypertrophy may contribute to rotator cuff impingement.



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

LABRUM/LIGAMENTS: There is a tear of the superior glenoid labrum.

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. Tear of the superior glenoid labrum.
2. AC joint hypertrophy may contribute to rotator cuff impingement.

Digitally Signed By: Imam, Naiyer
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