

All County, LLC

Diagnostic Radiology

Article 28 Diagnostic & Treatment Center

Cert. No. 7003267R

05/26/22

Aleksandr Kopach, PA
430 W Merrick Road
Suite# 2
Valley Stream, NY 11580
Fax #:(516) 612-7290

Re: Sean C Milliner
DOB: 07/22/1986
Pt. Tel#
Patient#: 300684

Dear Dr. Kopach:

MRI OF THE LEFT SHOULDER

TECHNIQUE: Sagittal T1 weighted and T2 weighted fast spin-echo and STIR images were obtained. Coronal T2 weighted fast spin-echo images were obtained. Axial T1 and T2 weighted fast spin-echo images were obtained.

FINDINGS: The glenohumeral joint is intact. The acromioclavicular joint demonstrates limited inferior expansion with near impingement upon the supraspinatus musculotendinous junction. There is an os acromiale congenital variant. There is apparent remote grade II acromioclavicular separation with corticated fragments interspersed between the distal clavicle and proximal acromion. Correlate clinically.

Evaluation of rotator cuff musculature reveals tendinosis of anterior fibers of the supraspinatus. Infraspinatus, teres minor and subscapularis muscles are preserved. There is a capsular effusion. There is decompression into the biceps long head tendon sheath. There is axillary recess distension. There is subcoracoid bursal distension. The biceps long head tendon is anatomic in position and is intrinsically intact. The biceps labral anchor is preserved. There is an anteroinferior labral tear.

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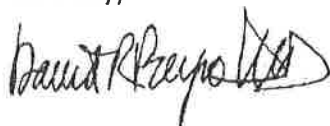
Patient#: 300684

MRI OF THE LEFT SHOULDER**IMPRESSION:**

1. Os acromiale.
2. Grade II acromioclavicular separation with multiple unfused fragments. Correlate clinically.
3. Insertional tendinosis of anterior fibers of the supraspinatus.
4. Anteroinferior labral tear.

Thank you for the courtesy of this referral.

Sincerely,



David R. Payne, M.D.

Diplomate, American Board of Radiology, with Added Qualifications in Neuroradiology

ALL COUNTY, LLC

T: 05/31/2022 10:36 AM

DP/VC

Electronically approved by: David Ross Payne, MD Date: 05/31/22 17:02