

PATIENT NAME: PAULA ALFONSINA
REFERRING PHYSICIAN: DR. MATHEW

DOB: 06/09/1968
DOS: 05/21/2022

MRI OF THE LEFT SHOULDER

INDICATION: Pain.

TECHNIQUE: Multiple T1 and T2 weighted MRI images of the left shoulder were obtained in the axial, sagittal and coronal planes without intravenous or intraarticular contrast.

FINDINGS: There are no acute displaced fractures, dislocations, destructive bony lesions or marrow infiltration in the proximal humerus and glenoid.

The rotator cuff musculature including the supraspinatus, subscapularis, infraspinatus and teres minor are normal in bulk without atrophy, edema or fatty infiltration. The biceps tendon is situated within the bicipital groove and its attachment to the superior labrum is intact. The glenoid labrum is grossly intact. There is no joint effusion. There are no masses or fluid collections associated with the glenohumeral joint.

There is a partial tear of the distal supraspinatus tendon. There is a partial tear of the distal subscapularis tendon. There is a partial tear of the distal infraspinatus tendon. There are moderate osteoarthritic changes with subcortical cystic changes in the anteroinferior aspect of the humeral head. Productive hypertrophic changes of the acromioclavicular joint with impingement of rotator cuff.

IMPRESSION:

1. Partial tear of the distal supraspinatus tendon.
2. Partial tear of the distal subscapularis tendon.
3. Partial tear of the distal infraspinatus tendon.
4. Moderate osteoarthritic changes with subcortical cystic changes in the anteroinferior aspect of the humeral head.
5. Productive hypertrophic changes of the acromioclavicular joint with impingement of rotator cuff.

Steve B. Losik M.D.

Steve B. Losik, M.D.
Board Certified Radiologist
Electronically Signed