



3760 Santa Rosalia Dr
Los Angeles, CA 90008
TEL:(888) 814-0206
FAX:(888) 814-0207

Final Report

MRI OF LEFT SHOULDER WITHOUT CONTRAST

PROFESSIONAL INTERPRETATION BY:MARS HEALTHCARE, INC.
TECHNICAL SERVICES PROVIDED BY:SOCAL IMAGING

PATIENT NAME: GARNER ANNETTE

D.O.B: Nov 15, 1959

STUDY DATE: Jul 16, 2020

REPORT DATE: Jul 17, 2020 13:47

PATIENT ID: RAM200809

REFERRING PHYSICIAN: GOFNUNG ERIC

APPROVED BY: DR AMJAD SAFVI

APPROVAL DATE: Jul 17, 2020 13:47

PROFESSIONAL INTERPRETATION REPORT

MRI OF THE LEFT SHOULDER JOINT WITHOUT CONTRAST

HISTORY: None provided

COMPARISONS: None

LIMITATIONS: None

TECHNIQUE:

Multiplanar, multiecho MRI of the shoulder was performed without administration of intravenous contrast.

FINDINGS:

The glenohumeral joint space is well maintained. The articular cartilage is well maintained. There is minimal glenohumeral joint effusion. There is minimal collection in the subacromiodeltoid bursa and superior subscapularis recess. It is seen as hypo intense on T1W and hyper intense on T2W images.

Type II acromion process is noted. The acromioclavicular joint shows marginal osteophytes, articular surface erosions and joint effusion.

Subarticular marrow edema noted in glenoid. Rest of the visualized bones reveal normal signal intensity. No evidence of marrow edema.

There are areas of abnormal signal within the supraspinatus tendon. The tendon is edematous and bulky. It is seen as intermediate signal on T1W and T2W images. The findings indicate tendinosis. There is articular and bursal surface partial thickness tear.



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The infraspinatus, subscapularis and teres minor tendons are intact and normal in appearance. No rotator cuff impingement.

The intraarticular and extraarticular segments of the long head of the biceps tendon are intact. The biceps tendon shows normal signal intensity. Minimal collection noted along tendon sheath of long head of biceps.

The glenoid labrum does not show obvious tear or cyst formation. The biceps-labral anchor is intact.

The neurovascular bundles appear unremarkable.

IMPRESSION:

1. Minimal glenohumeral joint effusion.
2. Minimal collection in the subacromiodeltoid bursa.
3. Supraspinatus tendinosis with articular and bursal surface partial thickness tear.
4. Bicipital tenosynovitis.
5. Acromioclavicular joint arthropathy.
6. Subarticular marrow edema noted in glenoid.

Thank you for referring this patient.



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Thank you for referring this patient.
Approved and electronically signed by me on the approved date below.

A handwritten signature in black ink that reads 'Amjad Safvi MD'.

DR AMJAD SAFVI
Jul 17, 2020 13:47

