AMRADNET

229 Peachtree St NE, Suite 965 Atlanta, GA 30303

itadiology iteport
Phone: 877.267.2348
Fax: 1.877.267.2348

Radiology Report

Patient Name	Date of Birth	Facility
i duciit Name	Date of birtii	1 acincy
JANE DOE	XX/XX/XXXX	TEST FACILITY
Referring Physician	1.	Faxed To
SMITH		1.877.267.2348
Exam Requested		
MRI OF RIGHT SHOULDER WITHOUT CONTRAST		
Indication		Date
Limited Range of Motion and Pain When Raising Right Ar	m	5/14/2012
Exam Date		Report Date
5/14/2012		5/14/2012

Accession: 501175

Examination: MRI OF THE RIGHT SHOULDER WITHOUT CONTRAST

Clinical Indication: Limited range of motion and pain when raising right arm.

Comparison: NONE

Technique: Multisequence / Multiplanar MR imaging was performed of the right shoulder.

Findings:

There are several partial tears involving the supraspinatus tendon near the insertion site and approximately 1.1 cm lateral to the insertion site.

There is a small shoulder joint effusion. The visualized glenoid labrum demonstrates no obvious tear. There is mild increased signal involving the subscapularis tendon. The infraspinatus tendon demonstrates no significant tear. Os acromiale is identified. Moderate osteoarthritic findings are seen at the acromioclavicular joint with mild osteoarthritis at glenohumeral joint. There is mild extrinsic impression upon the underlying supraspinatus tendon at the level of the acromioclavicular joint secondary to hypertrophic spurs.

Small incidental benign cysts are suggested at the humeral head and proximal humeral metaphysis, possibly degenerative.

Conclusion:

- 1. Several partial tears are seen involving the supraspinatus tendon at the insertion site and approximately 1.1 cm lateral to the insertion site.
- 2. Small shoulder joint effusion.
- 3. Os acromiale.
- Moderate osteoarthritis at acromioclavicular joint with mild osteoarthritis at glenohumeral joint.
- 5. Mild extrinsic impression upon underlying supraspinatus tendon secondary to hypertropic spurs at acromioclavicular joint. Correlate clinically for impingement.
- 6. Mild subscapularis tendinosis.

Expert Physician, MD ELECTRONICALLY SIGNED

Transcribed by: VS Reviewed by: HR

Final: || 18772672348: 5/14/2012 10:00:11 PM