

EXAM DATE: May-25-2011

MRI UPPER EXTREMITY, JOINT; WITHOUT CONTRAST (CPT)

MRI LEFT SHOULDER

CLINICAL INFORMATION:

Shoulder pain. History of fall from horse June 2010. Tender over rotator cuff interval and biceps region.

COMPARISON:

Radiographs of 03/23/2011.

PROCEDURE:

Coronal oblique T1 and T2. Sagittal oblique T2. Axial T2 and PD.
Sedation: None.

FINDINGS:

The AC joint is unremarkable. The acromion process has a type 1 configuration. There is mild bursal thickening over the supraspinatus tendon. No significant bursal fluid is appreciated. There is mild edema around a slightly thickened coracoacromial ligament.

There is mild heterogeneous increased signal in the supraspinatus tendon consistent with tendinosis. No frank tears are observed. The ~~infraspinatus appears~~ infraspinatus and subscapularis tendons appear unremarkable.

The biceps tendon is intact and lies within the intertubercular groove. The intraarticular biceps and biceps anchor appear intact. No obvious glenoid labral tear is appreciated. The articular cartilage of the glenohumeral joint appears intact. There is a small subchondral cortical depression in the central glenoid, a normal variant. No abnormal bone marrow or muscle signal is identified about the shoulder.

IMPRESSION:

1. Probable mild thickening of the coracohumeral ligament with periligamentous edema. This could result in impingement symptoms.
2. Mild subacromial/subdeltoid bursal thickening with probable mild supraspinatus tendinosis.

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