

ROTARU, KIRITIMATI
Birthdate: 19/07/1958 Sex: F Medicare Number: 21922579382
Your Reference: Lab Reference: 4232380
Laboratory: Territory X-Ray Services
Addressee: Dr JAMES TIERNEY Referred by: Dr JAMES TIERNEY

Name of Test: US SHOULDER/UPPER ARM Unilateral (OC820)
Requested: 18/08/2025 Collected: 05/09/2025 Reported: 09/09/2025 08:50

This report is for: Dr J. Tierney
Referred By:
Dr J. Tierney

US LT SHOULDER 05/09/2025 Reference: 4232380

ULTRASOUND LEFT SHOULDER

CLINICAL: Left shoulder pain. Supraspinatus injury?

REPORT:

Biceps tendon: A trace of fluid is seen along biceps tendon.

Subscapularis: Heterogeneity is seen.

Supraspinatus: Heterogeneity is seen with insertional calcification.

Infraspinatus: A hypoechoic infraspinatus is seen.

Teres minor: Normal.

Bursae: There is moderate subacromial/subdeltoid bursal thickening with bursal distortion at 40 degrees of abduction.

AC joint: Normal.

Posterior glenoid: Normal.

IMPRESSION:

Moderate subacromial/subdeltoid bursitis. Rotator cuff tendinosis.

Radiologist: Dr A. Bilal

