

Apollo RIS Patient Id : SKG39044

Patient Name : SUTHERLAND TESSA DOB : 04/12/1986 Service Date : 12/07/2022

MRI LEFT SHOULDER

Clinical History:

Three-month history of non-traumatic increasing left shoulder symptoms with mild loss of range of motion? Early frozen shoulder

Comparison:

No relevant prior imaging available for comparison at the time of reporting.

Findings:

The long head of biceps tendon is intact & lies in the bicipital groove. Supraspinatus tendon is intact.

Moderate insertional tendinosis of infraspinatus tendon, with a low-grade interstitial split tear. Mild subscapularis tendinopathy, with a small low-grade tear of its supero-distal insertional fibres, measuring 2 x 2 mm in size, with further mild medial interstitial delamination. Rotator cuff muscle bulk is preserved.

AC joint is unremarkable. Acromion is of type 2 configuration with mild lateral downsloping. There is mild prominence of the acromial attachment of coracoacromial ligament, which may pre-dispose to impingement. Mild subacromial bursal oedema.

Intact glenohumeral joint articular cartilage. No joint effusion or synovitis. No definite capsulitis. No discrete labral tear.

CONCLUSION:

Moderate insertional tendinosis of infraspinatus tendon, with a small low grade interstitial split tear.

Mild subscapularis tendinopathy, with a small low-grade tear of its superodistal insertional fibres, with further mild medial interstitial delamination.

Mildly lateral downsloping acromion + prominent acromial attachment of coracoacromial ligament, may pre-dispose to impingement. Mild subacromial bursal oedema.

No definite capsulitis.

Thank you for your referral.

Yours sincerely,

Dr Keshav Gupta - SKG Radiology

CC :

Dr Purdie Jane , 779 Beaufort Street, Mount Lawley WA 6050

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