

BENSON RADIOLOGY - Reference No: 7390164 Status: F

Patient:	Peter ORMSBY	Linked by:	Dr Funmilola Komolafe
DOB:	23/05/1952	Message:	Action already taken
Address:	17 Doe Street Broken Hill 2880		
Ordered by:	Dr Nona Mary KEARNEY on 21/05/2024		
Collected:	23/05/2024 - 2:39 PM	Notified by:	on 00/00/0000
Reported:	23/05/2024	Message:	

4RI RIGHT Shoulder This report is for: Dr N. M. Kearney
Referred By:
Dr N. M. Kearney

4RI RIGHT SHOULDER 23/05/2024 Reference: 7390164
Site: Thrive Medical ID: BR-JDI911Y

4RI RIGHT SHOULDER

Summary:
Supraglottic tendinosis but no full-thickness retear.

Clinical:
Rotator cuff repair 2008, ?supraspinatus tendinopathy.

Technique:
Routine multiplanar sequences.

Findings:
Acromioclavicular joint and acromion:
Mild AC joint osteoarthritis. The undersurface of the acromion is curved. There is a large subacromial bursal effusion.

Rotator cuff:
Supraspinatus: Prior repair. Moderate heterogeneity compatible with moderate tendinosis/post surgical change. There is no complication related to the suture anchor, and there is no full thickness retear. No muscle belly atrophy.
Infraspinatus: Mild tendinosis.
Teres minor: Intact.
Subscapularis: Moderate tendinosis. This is partial tearing of the deep fibres at the insertion.

Long head of biceps tendon:
Moderate tendinosis intra-articular segment..

Labrum and glenohumeral joint:
Degenerative superior and posterosuperior labral tear. Full-thickness glenoid chondral fissures anterior and posterior glenoid, with subchondral marrow oedema and cystic change. There are a few small full-thickness chondral fissures humeral head.
No full thickness chondral loss or subchondral marrow abnormality. No joint effusion, synovitis or intra-articular body.
Inferior glenohumeral ligament intact.

Other:
Normal alignment. No marrow replacing lesion or fracture.
No abnormality in the spinoglenoid or suprascapular notch.
Intramuscular lipoma within the deltoid muscle belly measuring 43 x 18 x 10 mm, simple.

Radiologist: Dr E. Wang