

Radiology Report

Patient Name:	Gleeson, Irene	Report Date:	12/19/2019 8:04:00 PM
Patient ID:	AJF855Z	Accession No.:	1567007-MR
Patient Birth Date:	12/20/1957	Report Status:	F
Referring Physician:	2849508H Bardawil Khaled	Reason For Study:	

Thank you for referring Irene Gleeson for an 3T MRI left shoulder

3T MRI LEFT SHOULDER:

Clinical History:

Injury 2 months ago. Exam showed possible rotator cuff tear.

Technique:

An unenhanced MRI examination of the left shoulder was performed.

Comparison:

None.

Report:

The long head of the biceps tendon resides within the bicipital groove and is intact. There is a moderate quantity of fluid located within the sheath of the long head of the biceps tendon.

The visualised portion of the subscapularis tendon are intact.

There appears to be a large 13 x 5mm full thickness partial width tear of the posterior supraspinatus tendon versus partial thickness bursal surface tear. There is moderate heterogeneous thickening and increased T2 signal intensity involving the mid and posterior portions of the supraspinatus tendon measuring up to 8mm in diameter consistent with tendinosis.

The infraspinatus and teres minor tendons are intact.

There is a very large quantity of fluid located within the subdeltoid bursa measuring up to 5.5mm in diameter. There is a moderate to large quantity of fluid located within the glenohumeral joint and subcoracoid bursa.

The glenoid labrum is intact. The articular cartilage of the glenohumeral joint is normal.

There is moderate heterogeneous soft tissue oedema overlying the anterior aspect of the surface of the humeral head.

There are multiple moderate sized subcortical degenerative cysts located within the posterolateral surface of the humeral head underlying the infraspinatus tendon representing a non-specific finding.

There is moderate degenerative osteoarthritis of the acromioclavicular joint. There are multiple small to moderate sized degenerative cysts located within the left acromion process and lateral aspect of the left clavicle adjacent to the acromioclavicular joint. There is a moderate sized area of oedema located within the lateral aspect of the clavicle adjacent to the acromioclavicular joint.

The suprascapular notch and quadrilateral space are normal.

IMPRESSION:

There is a large full-thickness partial width tear versus partial thickness bursal surface tear of the mid and posterior portions of the supraspinatus tendon. There is a large quantity of fluid located within the subdeltoid bursa and a moderate to large quantity of fluid located within the glenohumeral joint most likely due to the above described tear. I cannot exclude the presence of underlying subdeltoid bursitis. The glenoid labrum is intact. There is moderate arthritis of the acromioclavicular joint. There is no evidence of arthritis of the glenohumeral joint.

Yours sincerely,