Route to: Tewfile, Nichael H 19875 SW 65th Suite 100 Tualatin, OR 97062

Legacy Diagnostic Services



FRANK

Age: 61 years DOB: Sex: Male Pin Nor: 141295327 Med Nbr: 800156-18-75

Admit Date: 05/10/2005

Legacy Meridian Park Hospital 19300 SW 65th Tualatin, OR 97062

IMAGING MAGNETIC R E S ONA N

MR Shoulder Left: without

05/10/2005 9:28:58

MR-05-0127092

Contrast

CPT4 Codes

73221LT

REASON FOR EXAM:

LEFT SHOULDER FAIN

Report

MRI LEFT SHOULDER WITHOUT CONTRAST

CLINICAL DATA: Shoulder pain.

PROCEDURAL TECHNIQUE: Routine shoulder protocol was utilized.

FINDINGS: There is complete rupture of the supraspinatus tendon from its attachment site upon the greater tubercle. There is approximately 4 cm of proximal tendon retraction. No muscle atrophy is seen. There is a considerable amount of high signal within the substance of the infrasp natus tendon near its attachment site upon the greater tubercle. This probably represents some partial intrasubstance tearing. There is no evidence of a complete tear of this tendon. The subscapularis and teres minor tendons are intact.

There is a large joint effusion with fluid distending the subacromial-subdeltoid bursa and subcoracoid bu sa. There ae subchondral cystic changes involving the posterolateral aspect of the humeral head as well as the anteromedial aspect of the humeral head. No bony marrow edema or bone pruise is seen.

Coronal images show increased signal within the substance of the superior glenoid labrum more than typically seen. The finding is suspicious for a SLAP tear. The remaining portions of the labrum are grossly intact. The long head of the biceps tendon is intact. There is a type III acromion with some spurring along the anterior margin of the acromion. There is no significant spurring of the AC joint.

TMPRESSTON:

1. Complete rupture of the supraspinatus tendon from its attachment site upon the greater tubercle with marked proximal tendon retraction. No muscle atrophy is seen.

2. Partial intrasubstance tear of the infraspinatus tendon with no evidence of a complete

tear

Findings suspicious for a SLAP tear of the superior labrum.

Large joint effusion with marked distention of the subacromial-subdeltoid bursa.
 Subchondral cystic changes involving the humeral head.

Type III acromion.

D/T: 5/10/2005 ~ lob: 26342 ~ TDK/mt

Dictated on 0:/10/2005 09:39 by Kadlecek, Timothy D Transcribed or 05/10/2005 14:27 by MAT Verified on 0: /10/2005 15:19 by Timothy D. Kadlecek

Printed: 05-11-2005 05:01

Ordered by: Tew !ik, Michael H Radiology Provider Chart

Copies to: Tewiik, Michael H; McRinstry, Mark L; Butler, J Brad

M. Tennik, MD

COOK, FRANKLIN C

Pt Type: Outpatient