

Lab ID. : **441602100073** Reg No. : 366475

Patient Name : Mr. DEVIDAN SINGH Reg. Date : 10/Feb/2016 06:27PM

Age/Sex : 64 YRS / MALE Sample Coll. Date : 10/Feb/2016 06:27:21PM

Sample Rec. Date

Delivery: Self Approved Date: 11/Feb/2016 11:44AM

Refered By : Dr. MAYOM HOSPITAL



## MRI OF RIGHT SHOULDER JOINT

**Technique:** MRI of the right shoulder joint was performed using a dedicated 16 channel Shoulder coil of 3T Magnetom Spectra by Siemens. T1w, T2w and PD fat saturated images were obtained in sagittal, coronal and axial planes.

## Imaging findings

TDOSE INFOSYSTEMS PVT. LTD.

Ref. Source

The shoulder joint shows normal alignment.

Mild to moderate acromioclavicular joint arthropathy in the form of minimal joint fluid and mild periarticular soft tissue edema. Acromiohumeral joint space in reduced minimum being 6.2 mm with grade II/III articular side partial tear & hyperintense signal seen in supraspinatus tendon.

Mild joint effusion is seen. Mild joint fluid is also noted in subacromial/subdeltoid and subcoracoid bursa.

Thickening and hyperintense signal seen in rotator interval (superior glenohumeral and corachumeral ligament complex).

Inferior glenohumeral ligament is also thickened and hyperintense.

Few tiny cysts are seen at posterolateral aspect of humerus.

Rest of bones reveal normal marrow signal intensity.

The glenoid labrum is normal.

The middle glenohumeral ligament is normal.

The biceps tendon shows normal calibre and course in the bicipital groove.

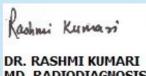
The rotator cuff including subscapularis, infraspinatus and teres minor tendons appears normal. These muscles show normal signal intensity.

IMPRESSION: Grade II/III tear of supraspinatus tendon with tendinosis & reduced acromiohumeral space with mild to moderate acromioclavicular joint arthropathy & mild joint effusion as described likely represent external impingement syndrome.

Thickened and hyperintense superior glenohumeral-coracohumeral complex and inferior glenohumeral ligament suggestive of adhesive capsulitis.

Please correlate clinically.

\*\*\* End Of Report \*\*\*



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