

Patient Name	MRN	Accession #	D.O.B.	Age	Sex	Study Date	MOD	Description
WOODFORD,BUCKNER	519646	A8279000101.01	11-25-1976		M	10-08-2008 12:47 pm	RF	RF RT ARTHRO SHOULDER

Final Report: 10-08-2008 02:18 pm, received from Transcription System

Report Dictated By: Averion-Mahloch, MD, Tim

Patient Name: WOODFORD, BUCKNER

DOB: 11/25/1976

Account #: 519646

MRN: 519646

Ord by: DOME, DAVID C

DATE: 10/08/2008

EXAM: RF RT ARTHRO SHOULDER/ INJ

HISTORY: 31-year-old male with right shoulder pain following a mountain biking accident.

Technique: The patient was positioned supine on the fluoroscopy table and an entry site was localized under fluoroscopic guidance. The skin was prepped and draped in the usual sterile fashion. 1% Lidocaine was used to anesthetize the skin and subcutaneous tissues. A 22-gauge spinal needle was introduced into the anterior aspect of the glenohumeral joint and approximately 12 cc of iodinated contrast and dilute gadolinium were introduced into the joint. The needle was removed and the patient was sent for further imaging.

IMPRESSION:

1. The patient is status post right shoulder arthrogram prior to MRI without complication.

D: 10/08/2008 14:18:14

Dictated by: Averion-Mahloch, MD, Tim

Electronically Signed by: Averion-Mahloch, MD, Tim

Patient Name	MRN	Accession #	D.O.B.	Age	Sex	Study Date	MOD	Description
WOODFORD, BUCKNER	519646	A8279000101.02	11-25-1976		M	10-08-2008 01:14 pm	MR	MR RT SHOULDER WITH C

Final Report: 10-08-2008 02:24 pm, received from Transcription System

Report Dictated By: Averion-Mahloch, MD, Tim

Patient Name: WOODFORD, BUCKNER

DOB: 11/25/1976

Account #: 519646

MRN: 519646

Ord by: DOME, DAVID C

DATE: 10/08/2008

EXAM: MR RT SHOULDER WITH CONTRAST

HISTORY: 31-year-old male with right shoulder pain following a mountain biking accident.

COMPARISON: X-ray dated 10/06/2008.

This study was performed immediately following arthrography.

FINDINGS: There is disruption of the superior acromioclavicular ligament at its clavicular attachment and there is disruption of the coracoid attachment of the coracoclavicular ligament. This represents a grade 3 injury to the acromioclavicular and coracoclavicular joints. There is associated prominent soft tissue edema and mild marrow edema. There is no evidence of fracture.

There is very subtle signal along the bursal sided fibers of the supraspinatus tendon. This represents a very low grade tear. The infraspinatus and teres minor tendons appear normal. There is probable tendinosis of the subscapularis tendon. The tendon of the long head of the biceps appears normal.

There is increased signal within the posterior-superior aspect of the glenoid labrum and in the anterior-inferior labrum. The anterior-inferior labral signal is consistent with a large labral tear. The posterosuperior signal may represent an additional SLAP tear. The glenohumeral ligaments appear intact.

There is mild subcortical cystic change in the posterior aspect of the humeral head. The muscles about the shoulder appear normal.

IMPRESSION:

1. There is a grade 3 injury to the right acromioclavicular joint with tears of the superior acromioclavicular and coracoclavicular ligaments.
2. There is a large tear of the anterior-inferior labrum and a

possible additional SLAP tear.

3. There is a very low grade bursal side a tear the supraspinatus tendon.

4. There is tendinosis of the subscapularis tendon.

D: 10/08/2008 14:20:05

Dictated by: Averion-Mahloch, MD, Tim

Electronically Signed by: Averion-Mahloch, MD, Tim

Internal Note: 10-08-2008 02:04 pm, by Megan Nicole Gilliam, Radiology MRI

xray 10/6/08