

FLANAGAN, EAMON
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Phone:

Birthdate: 25/02/1976

Sex: M

Medicare Number:

Your Reference:

Lab Reference: CUR11888105-FOREARM

Laboratory: SKG

Addressee: DR LUKE FINKELSTEIN

Referred by: LUKE DR FINKELSTEIN

Name of test: FOREARM OR ELBOW ULTRASOUND (BILATERAL), RIGHT SHOULDER OR UPPER ARM ULTRASOUND,

Requested 17/08/2024

Collected: 21/08/2024

Reported: 23/08/2024 09:53:00

Apollo RIS Patient Id : SKG2231095

Patient Name : FLANAGAN EAMON DOB : 25/02/1976 Service Date : 21/08/2024

US FOREARM/ELBOW BILATERAL ; SHOULDER/UPPER ARM UNILATERAL RIGHT

Clinical History:

? Medial epicondylitis

? Subacromial bursitis

Findings:

Ultrasound both elbows:

The CEO is normal bilaterally.

The RCL and UCL remain intact bilaterally.

The posterior interosseous nerve is normal on the right and left.

The right-sided ulnar nerve is normal but the left-sided ulnar nerve subluxes from the groove.

There is bilateral tendinopathy and hyperaemia of the common flexor origin but no tear is present on either side.

A small joint effusion is present in the coronoid fossa.

The distal biceps tendon insertions are normal bilaterally.

Spur formation at the right and left triceps insertion.

Degenerative changes at the proximal olecranon bilaterally.

Ultrasound examination of the right shoulder:

The tendon of the long head of biceps muscle is intact.

There is a small posterior supraspinatus insertional tear present measuring 9 x 4 x 5 mm situated 14 mm from the bicipital groove.

The subscapular and infraspinatus tendons are intact

The AC joint is degenerative but not tender.

The subacromial bursa walls are mildly thickened.

CONCLUSION:

Bilateral medial epicondylitis change is present.

Small intrasubstance posterior supraspinatus tendon tear. Mild subacromial bursitis.

Dr Liezel Reif - SKG Radiology

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