



Patient Name:

RRI027

Patient ID: Gender: Date of Birth: Home Phone:

Referring Physician: DAVIES, TRICIA

Organization:

City West

Accession Number: BR-4025208-MR Requested Date: June 8, 2018 08:34

Report Status: Final
Requested Procedure: 4106228
Procedure Description: MRI PELVIS

Modality: MR

Findings

Radiologist:

VOYVODIC, FRANK

MRI PELVIS

Summary:

No MRI scan evidence of mullerian duct anomaly, adenomyosis, tubal dilatation or infiltrating cul-de-sac endometriosis.

Borderline oligo-follicular ovarian morphology bilaterally.

Clinical:

Recurrent implantation failure.

Technique:

3T multiplanar MR imaging. IV Buscopan. day 26 menstrual cycle. G0P0.

Findings:

Uterus:

Morphology: Midline anteverted anteflexed.

Convex external uterine fundal contour - minor arcuate configuration - no septum or duplication.

Size (uterine corpus):

4.5 x 5.2 x 3.9cm (48cc)

Cervix length: 2.9cm

Adenomyosis:

Submucosal microcysts not identified.

Anterior uterus max JZ thickness 5mm.

Posterior uterus max JZ thickness 6mm.

Fundal uterus max JZ thickness 5mm.

Leiomyoma:

Absent.

Endometrium:





7mm thickness. No polyp, masses or adhesions.

Cervix:

Normal (small nabothian cysts at internal and external os).

Vagina:

Normal morphology. Normal posterior vaginal fornix and rectocervical septum.

Ovaries:

Right ovary:

Position: Lateral adnexa.

Size: 2.1 x 2.9 x 1.5cm (4.8cc)

Follicle Count: Five <10mm.

No masses or endometriotic cysts.

Left ovary:

Position: High lateral adnexa abutting uterine body.

Size: 3.6 x 2.4 x 4.1cm (18.5cc)

Follicle Count: Four <10mm, one at 25mm.

No mass or endometriotic cyst.

Adnexa:

No tubal dilatation.

Trace of fluid posterior cul-de-sac - no mass, adhesions or infiltrating endometriosis.

Other findings:

Normal morphology rectosigmoid colon, urinary bladder, urethra and levator ani musculature.

Dr Frank Voyvodic Dr James Hopkins

Electronically signed 08/06/2018 20:50