

**Patient Name:**  
**Patient ID:** RRI483  
**Gender:**  
**Date of Birth:**  
**Home Phone:**  
**Referring Physician:** REID, SALLY  
**Organization:** North Adelaide

**Accession Number:** BR-5330439-MR  
**Requested Date:** November 25, 2020 08:01  
**Report Status:** Final  
**Requested Procedure:** 5594249  
**Procedure Description:** MRI PELVIS  
**Modality:** MR

## **Findings**

**Radiologist:** JENKINS, MELISSA

## **MRI PELVIS**

### **Summary:**

Junctional zone appears mildly expanded, compatible with adenomyosis. JZ thickness up to 9mm and up to 50% myometrial thickness.

No uterine lesion.

No endometriosis, or deep/infiltrating endometriotic deposit identified.

### **Clinical:**

G0 P0. Endometriosis and adenomyosis at laparoscopy January 2020. Ongoing bleeding and pain.

### **Technique:**

Multi-parametric pelvic MRI fertility protocol including Volumetric 3D Coronal T2 plus reconstructions, T1 axial pre/post fat saturation.

### **Findings:**

Day 24 of cycle. G0 P0.

### **Uterus:**

Size and Morphology: Anteverted uterus measures 9.9 x 5.5 x 5.8cm. Conventional morphology, with no septum or duplication.

Endometrial Thickness: 10mm thickness. No defined endometrial lesion.

Junctional Zone: Junctional zone does appear ill defined and mildly expanded. When in the absence of myometrial contractions, up to 9mm thickness. There is no submucosal microcyst formation. Junctional zone thickness up to 50% of myometrium.

Uterine Lesions: No discrete uterine fibroid.

### **Cervix and Vagina:**

NAD.

### **Left Ovary:**

Position: Posterior left adnexa abutting cervix.

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Size: 6cc (2.9 x 1.4 x 2.7cm).

Follicle(s): Two follicles measuring 5 and 6mm.

Lesions and/or Endometrioma: None identified.

**Right Ovary:**

Position: Right adnexa.

Size: 4cc (2.5 x 1.3 x 2.6cm).

Follicle(s): Six follicles at 7mm or less.

Lesions and/or Endometrioma: None identified.

**Adnexa:**

Physiological volume of free fluid within the pouch of Douglas. No hydrosalpinx. No deep/infiltrating endometriotic deposit identified.

Dr Melissa Jenkins

Dr Frank Voyvodic

Electronically signed 26/11/2020 08:39

**Relevant Clinical Information**

MB-MRI PELVIS