



Patient Name:

**RRI491** 

Patient ID: Gender:

Date of Birth: Home Phone:

**Referring Physician:** YOONG, RAY **Organization:** Salisbury

Accession Number: BR-5320354-MR

Requested Date: November 17, 2020 16:18

Report Status: Final
Requested Procedure: 5582686
Procedure Description: MRI PELVIS

Modality: MR

# **Findings**

Radiologist: REID, MICHAEL

### **MRI PELVIS**

#### **Summary**:

- 1. Mild superficial adenomyosis.
- 2. No overt endometriotic deposit or adhesion.
- 3. Dominant follicles on both ovaries with small right ovarian collapsing follicle also noted.

### Clinical:

Multiple failed ET. Check for adenomyosis.

**Technique:** Multiparametric pelvic MRI fertility protocol including Volumetric 3D Coronal T2 plus reconstructions, T1 axial pre/post fat saturation.

## Findings:

# **Uterus:**

Size and Morphology: The uterus measures 80 x 31 x 37mm and is anteverted, normal morphology.

Endometrial Thickness: The endometrial thickness measures 4mm.

<u>Junctional Zone</u>: The junctional zone measures 6mm. Not thickened. Small right body junctional zone cyst. This supports mild superficial adenomyosis.

Uterine Lesions: Nil.

Cervix and Vagina: Nil significant.

### Left Ovary:

Position: Left adnexa.

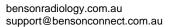
Size: 29 x 24 x 21mm (7.3cc).

Follicles: Three.

Lesions and/or Endometrioma: No significant lesion or endometrioma. 21mm dominant follicle.

### **Right Ovary:**

Position: Right adnexa.





Size: 24 x 22 x 20mm (5.3cc).

Follicles: Three.

<u>Lesions and/or Endometrioma</u>: 24mm dominant follicle. Small complex cyst medial to this (10mm) consistent with a collapsing follicular nature. No haemorrhagic lesion characteristic of an endometrioma.

Adnexa/POD: Nil significant. Trace fluid in the Pouch of Douglas. No focal endometrioma.

Other Findings: Nil significant. No adenopathy.

<u>Dr Michael Reid</u> <u>Dr Frank Voyvodic</u>

Electronically signed 18/11/2020 09:53

Relevant Clinical Information SL-MRI PELVIS