

Patient Name: RRI577
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: COCCHIARO, CARMEL
Organization: North Adelaide

Accession Number: BR-5734407-MR
Requested Date: August 10, 2021 13:44
Report Status: Final
Requested Procedure: 6056402
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: KNOX, STEVEN

MRI PELVIS

Summary:

1. IUD has not been identified within the peritoneal cavity including upper abdomen and deep pelvis, nor within the uterine cavity.
2. Fibroids are non degenerate, non suspicious. No submucosal fibroids identified. No features of significant pelvic architecture extortion or other findings of endometriosis/fibrosis.
3. Hepatic steatosis.

Clinical:

Mirena IUD not able to be visualised on Ultrasound.

Technique:

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

Findings:

Uterus:

Size & morphology: Axial version anteflexion, size (uterine body and cervix). 10.7 x 7.2 x 8.2cm. Fibroid uterus.

Endometrial thickness: ET = 2mm. Cavity is displaced slightly to the right of midline by the fibroid. There is no IUD present.

Junctional zone: Normal. No expansion or submucosal cysts to support adenomyosis.

Uterine lesions: Two dominant fibroids. These are non degenerate/non suspicious. Characterised as follows.

1. Left lower lateral uterine body or a broad serosal bulge. Size 42mm. Distance of around 10mm from mucosal surface, 2mm from serosal surface.
2. Left uterine body/fundal intermural. Some mass effect on the cavity although no significant submucosal component. Size 45mm. Distance of 5mm from mucosal surface, 5mm from serosal surface.

Cervix & vagina:

No cervical or vaginal lesions.

Left ovary:

Position: Superior left lateral adnexa just above uterine fundus.

Size: 29 x 23 x 22mm (7.6ml).

Follicle(s): Present. Approximately 10 subcentimetre follicles.

Lesions and/or endometrioma: Not identified.

Right ovary:

Position: Right lateral adnexa.

Size: 30 x 20 x 17mm (5.3ml).

Follicle(s): Present. Approximately 12 subcentimetre follicles.

Lesions and/or endometrioma: Not identified.

Adnexa:

Minimal physiologic fluid. There are no features of obliterative deep cul-de-sac disease. Although the distal sigmoid does bear a very close relationship to the posterior uterine serosa and some mild uncomplicated adhesions in this area are difficult to entirely exclude. No features of endometriotic deposit are identified. The uterosacral ligaments do not appear thickened. There is no hydrosalpinx or pelvic side wall endometrioma.

Upper Abdomen:

There is no definable IUD within the upper abdomen. There is incidental hepatic steatosis. No additional upper abdominal findings.

Dr Steven Knox

Electronically signed 10/08/2021 16:55

Relevant Clinical Information

MB-MRI PELVIS