

**Patient Name:** RRI017  
**Patient ID:**  
**Gender:**  
**Date of Birth:**  
**Home Phone:**  
**Referring Physician:** MCLEAN, ANGELA  
**Organization:** North Adelaide

**Accession Number:** BR-4734567-MR  
**Requested Date:** October 21, 2019 10:13  
**Report Status:** Final  
**Requested Procedure:** 4918652  
**Procedure Description:** MRI PELVIS  
**Modality:** MR

## **Findings**

**Radiologist:** TOPHAM, DEAN

## **PELVIC MRI**

### **Summary:**

**Conventional uterine anatomy with no septum or duplication. No endocavitary pathology. No adenomyosis. No mass.**

**Normal ovarian follicular activity.**

**No endometriosis/ anatomic distortion or endometrioma. No hydrosalpinx.**

### **Clinical:**

Scan suggestive of adenomyosis. Previous LSCS. Planning FET.

### **Technique:**

T2 sagittal, T2 SPACE axial and coronal, T1 Dixon axial.

### **Comparison Study:**

Pelvic ultrasound from 30/05/2017.

### **Findings:**

#### **Uterus:**

Size: 10.1 x 4.5 x 5.9cm. Anteverted. No flexion/ distortion. Arcuate morphology with fundal indentation of the cavity of around 7mm and obtuse intercornual angle.

There is a defect in the anterior wall of the body of the uterus in keeping with previous LSCS site. No dehiscence. Scar thickness 5mm.

Lesions: No focal myometrial lesion is identified.

Junctional zone: The junctional zone measures up to 6mm in thickness and is normal in size. Junctional zone towards the fundus of the uterus is difficult to measure due to movement blurring. No subendometrial cystic change or areas of haemorrhage seen.

Endometrium: Not thickened measuring 5.8mm and is normal for age. No endocavitary pathology.

#### **Cervix:**

Nabothian cysts are seen in the cervix. No cervical mass.

#### **Right Ovary:**

The right ovary is difficult to visualise, but appears normal in size measuring 3.0 x 1.8 x 2.7cm (estimated volume 7.6ml). Physiological follicles are present, no large ovarian mass is seen. No ovarian cysts.

**Left Ovary:**

The left ovary is normal in size measuring 3.2 x 2.4 x 2.8cm, estimated volume of 11ml. Physiological follicles are present. No large adnexal mass or cyst is seen. No evidence of endometrioma.

**Other Findings:**

Small amount of fluid seen in the pouch of Douglas. No features of obliterative cul de sac disease. No hydrosalpinx. No pelvic lymphadenopathy is seen. Rectum appears unremarkable. No abnormal marrow signal in the bones.

**Dr Dean Topham****Dr Steven Knox**

Electronically signed 21/10/2019 17:22