



**Patient Name:** 

**RRI087** 

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

Referring Physician: MCLEAN, ANGELA

Organization:

North Adelaide

**Accession Number:** BR-4105137-MR Requested Date: August 6, 2018 15:13

Report Status: Final Requested Procedure: 4198038 **Procedure Description:** MRI PELVIS

Modality: MR

# **Findings**

Radiologist:

HOPKINS, JAMES

#### **PELVIC MRI**

#### **Summary**:

Borderline anterior corpus junctional zone thickening which may relate to localised adenomyosis but without microcystic change or more definitive MRI features of such.

No septum, duplication or endocavitary lesion.

#### Clinical:

Recurrent implantation failure FI? adenomyosis.

# Technique:

Multiplanar non contrast pelvic coverage.

### Findings:

### **Uterus:**

Anteverted, minimally anteflexed, mild rightward tilt.

Lower uterine segment caesarean section scar noted.

Normal fundal contour. No septum or duplication.

Size (corpus): 64 x 63 x 46mm: 96cc.

#### Cervix:

29mm. Nabothian cysts noted.

#### Adenomyosis:

Junctional zone thickness: Anterior 10mm, fundal 5mm, posterior 6mm.

No subendometrial microcystic change. Borderline localised anterior junctional zone thickness.

# Leiomyoma:

Nil.

## Endometrium:

7mm thickness. No focal endometrial lesion or endocavitary mass.





## **Ovaries:**

Right:

Lateral pelvic lie. 29 x 19 x 30mm 8.6cc.

Follicles <10mm: 25.

Follicles >10mm: Nil.

Single haemorrhagic follicle.

Left:

Left lateral pelvic lie. 31 x 22 x 33mm 12cc.

Follicles <10mm: 15.

Follicles >10mm: Nil.

Nil haemorrhagic or endometriotic cysts.

### Adnexa and serosa:

No tubal dilatation. No evidence of deeply infiltrating endometriosis.

## Other:

No acute small or large bowel findings within the pelvis. No ascites.

## <u>Dr James Hopkins</u> <u>Dr Frank Voyvodic</u>

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