



**Patient Name:** 

**RRI102** 

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

Referring Physician: YOONG, RAY Ashford

Organization:

BR-3011895-MR Accession Number: Requested Date: April 22, 2016 08:55

Report Status: Final Requested Procedure: 2947217 **Procedure Description:** MRI PELVIS

Modality: MR

# **Findings**

Radiologist: KNOX, STEVEN

### **MRI PELVIS**

#### Summary:

Uterine adenomyosis confirmed. Small incidental intramural/subserosal fibroids. The fluid material within the posterior cul-de-sac is favoured as post laparoscopy noting it is day 1 post procedure and does not have haemorrhagic signal. There are no features of posterior cul-de-sac obliteration or significant fibrosis. No hydrosalpinx.

## Clinical:

? Fibroids. ? Adenomyosis.

# Technique:

Multi-parametric pelvic MRI fertility protocol including volumetric 3D coronal T2 plus reconstructions, T1 axial pre/post fat saturation. Current day 2. G1 P0. Laparoscopy yesterday.

### Findings:

#### **Uterus:**

Size & morphology: Retroverted anteflexed. Size (uterine body and cervix) 96 x 51 x 62mm.

Endometrial thickness: ET=9mm. No endocavitary pathology.

Junctional zone: Multifocal adenomyosis with submucosal microcysts most definable at the mid uterine body anteriorly (8mm) and multiple small submucosal microcysts at posterior fundus with associated expansion of the junctional zone. The junctional zone is indistinct related to the day 2 scan. Approximate 8mm anteriorly, 4mm at fundus and 19mm posteriorly. The submucosal microcysts serve as direct supportive evidence of background adenomyosis.

<u>Uterine lesions</u>: Several intramural/subserosal fibroids. There is no submucosal projection identified.

- 1. Left posterior uterine body pedunculated subserosal (FIGO 7). Size 18 x 13mm. Base of attachment 4mm.
- 2. Anterior left upper uterine body intramural/subserosal FIGO 5). 10mm. Contact to serosal surface 11mm from mucosal surface.

## Cervix & Vagina:

Nabothian cysts. No vaginal lesion.

# Left Ovary:

Position: Left lateral adnexa.

Size: 31 x 16 x 32mm (8.3ml).

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

Lesions and/or endometrioma: Not identified.







# **Right Ovary:**

Position: Right lateral adnexa.

Size: 27 x 16 x 32mm (4.8ml).

Follicle(s): Present. Approximately 8 subcentimetre follicles.

Lesions and/or endometrioma: Not identified.

#### Adnexa:

Noting that this is day 1 post laparoscopy the fluid with some heterogeneity within the posterior cul-de-sac is favoured as irritation/post surgical. No haemorrhagic signal. The posterior cul-de-sac remains definable with no posterior cul-de-sac obliteration/fibrosis. Uterosacral ligaments appear appropriate. No serosal endometriotic plaques are noted. There is mild dilatation of the right ureter and there is a posterior bladder wall diverticulum measuring 23mm and with neck at 3mm noted. Simple features. No solid component.

No hydrosalpinx. No pelvic side wall endometrioma.

Dr Steven Knox Dr Frank Voyvodic

Electronically signed 22/04/2016 13:20