





RRI107

Accession Number: BR-4158250-MR

Requested Date: September 12, 2018 09:08

Report Status: Final
Requested Procedure: 4259095
Procedure Description: MRI PELVIS

Modality: MR

Referring Physician: STANKIEWICZ, M **Organization:** Modbury Hospital

Findings

Radiologist: CHONG, WOON KIT

MRI PELVIS

Summary:

No active endometriotic plaques identified in the pelvis or extraperitoneal.

No mullerian duct abnormality, adenomyosis, endometriomas or hydrosalpinx.

Physiological fluid in the pelvis.

Clinical:

Mirena in situ. Surgically excised endometriosis. Pain right iliac fossa/right groin radiating to right kidney and inner aspect of right thigh. PR bleeding.

To exclude extraperitoneal endometriosis, in particular right femoral/inguinal canal.

Technique:

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

Uterus:

Size & morphology: 92cc. 4.1 x 5.0 x 8.6cm. No mullerian duct abnormality.

Endometrial thickness: 3mm. Mirena device in situ.

Junctional zone: Anterior maximal junctional zone thickness 7mm.

Posterior maximal junctional zone thickness 5mm.

Fundal maximal junctional zone thickness 3mm.

No MRI features of adenomyosis.

Uterine lesions: Nil.

Cervix & vagina:

No morphological abnormalities.





Left ovary:

Position: Lateral adnexa.

Size: 29cc.

Follicles: Greater than 12. Subcentimetre. Dominant simple follicular cyst measuring 3.8cm.

Lesions and/or endometrioma: Nil.

Right ovary:

Position: lateral adnexa.

Size: 13.5cc (2.2 x 2.5 x 4.7cm).

Follicles: Greater than 12. Subcentimetre. Dominant follicle cyst measuring 1.3cm.

Lesions and/or endometrioma: Nil.

Adnexa:

No hydrosalpinx.

Other findings:

Small amount of fluid in the pelvis within physiological limits. No adhesions/distortion in the pelvis.

Inguinal canal is clear bilaterally. Femoral canal also appears clear. No endometriotic plaques.

Dr Woon Kit Chong Dr Frank Voyvodic

Electronically signed 12/09/2018 13:19