

Patient Name: RRI014
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: TREMELLEN, KELTON
Organization: City West

Accession Number: BR-3828362-MR
Requested Date: January 16, 2018 11:22
Report Status: Final
Requested Procedure: 3880861
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: KNOX, STEVEN

MRI PELVIS

Summary:

Diffuse uterine adenomyosis. No endocavitary pathology. No concerning uterine lesions with a few small intramural fibroids. No septum or duplication.

Polycystic ovarian morphology. No hydrosalpinx or features of pelvic endometriosis/fibrosis.

Clinical:

Suggestion of adenomyosis on ultrasound.

Technique:

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

Findings:

Uterus:

Size & morphology: Anteverted minimally anteflex. Size (uterine body and cervix) 90mm x 46mm x 65mm.

Endometrial thickness: ET=7mm. No concerning endocavitary pathology. Small mucosal cyst at the fundus at 2mm.

Junctional zone: There are multifocal submucosal microcysts particularly at the posterior lower uterine body which supports background adenomyosis. Irregularity and several regions of more focal expansion to the JZ measuring maximum 11mm anteriorly, 12mm fundus and 9mm posteriorly. No discrete adenomyoma.

Uterine lesions: Small intramural fundal fibroid without submucosal projection measuring 9mm x 12mm. 3mm from mucosal surface. 6mm from serosal surface. There is also a small lower uterine segment mid uterine anterior intramural fibroid at 6mm with a distance of 2mm from mucosal surface and 4mm from serosal surface.

Cervix & vagina: No cervical or vaginal lesion.

Left ovary:

Position: Left lateral adnexa.

Size: 30mm x 25mm x 33mm (12.5mls). Enlargement related to polycystic ovarian morphology.

Follicle(s): > 25 peripherally placed subcentimetre follicles.

Lesions and/or endometrioma: Not identified.

Right ovary:

Position: Right lateral adnexa.

Size: 34mm x 30mm x 38mm (20.1mls). Enlargement related to polycystic ovarian morphology.

Follicle(s): Present. > 25 subcentimetre follicles. No dominant follicle.

Lesions and/or endometrioma: Not identified.

Adnexa: Minimal physiologic fluid. No evidence of pelvic endometriosis/fibrosis. No architectural distortion. Posterior cul de sac appears appropriate. Normal bladder contours. No hydrosalpinx. No pelvic sidewall endometrioma.

Other findings: Nil significant.

Dr Steven Knox

Dr Jennifer Cowie

Electronically signed 16/01/2018 17:08