



**Patient Name:** 

**RRI137** 

Patient ID: Gender: Date of Birth:

**Home Phone:** Referring Physician: HARVEY, J

Organization:

Accession Number: Requested Date:

BR-4127628-MR August 21, 2018 15:48

Report Status: Final Requested Procedure: 4223882 **Procedure Description:** MRI PELVIS

Modality: MR

# **Findings**

Radiologist:

JENKINS, MELISSA

North Adelaide

#### **MRI PELVIS**

#### Summary:

11mm posterior intramural fibroid. No submucosal lesion. No convincing endometrial lesion, adenomyosis or endometriosis.

#### Clinical:

Primary subfertility. Ultrasound 4cm left subserosal fibroid. Any endometriosis.

### Technique:

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

## Findings:

#### **Uterus:**

Size & morphology: Axially orientated uterus is tilted to the right. Normal morphology, with no septum or duplication.

Endometrial thickness: Up to 12mm thickness. No convincing endometrial lesion.

Junctional zone: Junctional zone is not expanded, measuring maxillary 7mm thickness. No submucosal microcyst formation to support superficial adenomyosis.

<u>Uterine lesions</u>: There is an 11mm posterior intramural fibroid. No convincing further uterine lesion, noting that absence of Buscopan does result in bowel peristalsis and fundal appearances of the mobile uterus are a little ill defined.

### Cervix & vagina:

Unremarkable.

#### Left ovary:

Position: left adnexa

Size: 5cc, (1.9 x 2 x 2.5cm)

Follicle(s): 10 follicles at 5mm or less.



Lesions and/or endometrioma: Non identified.

## Right ovary:

Position: right adnexa.

Size: 8cc (3.1 x 1.5 x 3.4cm)

Follicle(s): Approx. 18 follicles at 5mm or less. Dominant 16mm follicle. Further collapsing follicle/cyst at 13mm.

Lesions and/or endometrioma: None identified.

### Adnexa:

Physiological volume of fluid within the pouch of Douglas. No deep/ infiltrating endometriotic deposit. No hydrosalpinx or adnexal mass.

## Other findings:

Nil significant.

<u>Dr Melissa Jenkins</u> <u>Dr Parineet Takhar</u>

Electronically signed 27/08/2018 17:10