

# SPECIALIZED ULTRASOUND IN GYNECOLOGY & OBSTETRICS

200 JAMES ST. SOUTH, SUITE 305 HAMILTON, ON L8P 3A9 | PHONE: (905) 522-2220 FAX: (905) 522-2280 | WWW.SUGOCLINIC.COM

Our patient consented to a limited abdominal and full pelvic ultrasound examination using real-time transabdominal scan and transvaginal scan technique. Today's ultrasound was performed by a gynecologic sonologist.

<u>INDICATION:</u> 47F - hx of endometriomas, limited mobility of uterus. Planning hyst. Sonologist for endo mapping.

LMP: 25-Dec-2024

**RELEVANT CLINICAL HISTORY:** No

**UTERUS:** Normal. The uterus was well visualized.

Measurements: 55 x 56 x 28 mm; Volume: 45 ml.

Orientation: Anteverted

The cervix measures 30 mm in length.

Adenomyosis: Evaluation for adenomyosis revealed: Nil.

Fibroids: No fibroids are visualized

Congenital anomaly: No

**Endometrium:** 

Thickness 2.9mm. Endometrial pathology: None.

### **OVARIES/ADNEXA:**

Right Ovary: Normal

was well visualized and measured 28 x 17 x 18 mm; Volume: 4.3 ml.

Mobile

**Left Ovary: Abnormal** 

was well visualized and measured 30 x 27 x 18 mm; Volume: 7.9 ml.

Mobile

M. Leonardi, MD, PhD, FRCSC Date of transcription: 08 Jan 2025

Sonographer: M. Palmer



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			details:
Left ovarian cyst	25 x 25 x 15 mm	Endometrioma	
	Volume: 4.9 ml		

There is a unilocular cystic lesion with ground glass echogenic contents, smooth and thin walls, no solid components, and no abnormal Doppler vascularity. This is benign as per the IOTA Simple Rules. This is an endometrioma as per IOTA Easy Descriptors.

Adnexa: Normal

**FREE FLUID:** Present

Enhanced evaluation for superficial endometriosis: **Yes** No

#### **ANTERIOR COMPARTMENT:**

Vesicouterine peritoneum: Normal.

**Bladder:** Normal. **Ureters:** Normal.

**Kidneys:** No evidence of hydronephrosis bilaterally.

#### **POSTERIOR COMPARTMENT:**

Vagina: Normal.

Uterosacral ligaments + Torus uterinus: Normal.

Bowel: Normal.

Rectouterine pouch peritoneum: Normal.

**Sliding sign:** Positive **Interpretation:** 

Non-obliterated (normal)

### **IMPRESSION:**

Abnormal advanced pelvic ultrasound

The following were identified:

- Ovarian endometriosis

During and following the ultrasound performed today, I provided real-time feedback regarding the ultrasound findings to the patient. I provided some basic information about the findings. I validated the patient's

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forward. It was a pleasure to be involved in their care. Thank you for the opportunity to contribute to your patient's diagnostic journey.

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