

Patient Name: RRI138
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: MCLEAN, ANGELA
Organization: Christies Beach

Accession Number: BR-2859314-MR
Requested Date: December 15, 2015 08:29
Report Status: Final
Requested Procedure: 2773745
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: VOYVODIC, FRANK

MRI PELVIS

Summary:

Arcuate uterus - no significant Mullerian duct anomaly.

Anterior and posterior uterine body adenomyosis.

Two submucosal fibroids (>50% intramural, FIGO 2).

Normal ovaries.

Normal cul-de-sac.

Clinical:

Planning fertility therapy. ?adenomyosis.

Technique:

1.5T multiplanar phased array surface coil MR imaging. Intravenous Buscopan. Day 22 menstrual cycle. G0P0.

Comparison Films:

Nil available.

Findings:

Uterus:

Morphology:

Anteverted anteflexed midline position.

Arcuate configuration - convex external uterine fundal contour - no septum or duplication.

Size (corpus + cervix):

9.0 x 5.8 x 4.7cm (128cc)

Adenomyosis:

Submucosal microcysts not identified.

Anterior uterus max JZ thickness 12mm.

Posterior uterus max JZ thickness 12mm.

Fundal uterus max JZ thickness 6mm.

Leiomyoma: Present.

Lesion 1: Intramural (FIGO 4) right posterior fundus 14mm diameter, non degenerate.

Lesion 2: Submucosal 50% intramural (FIGO 2) anterior body 14mm diameter, non degenerate.

Lesion 3: Submucosal 75% intramural (FIGO 2) 19mm diameter, non degenerate.

Lesion 4: Intramural (FIGO 4) posterior central fundus 12mm, non degenerate.

Endometrium:

No endocavitary lesion.

Maximum thickness 5mm.

Cervix:

Normal.

Vagina:

Normal morphology.

Normal posterior vaginal fornix and rectocervical septum.

Ovaries:

Right ovary:

Position: Lateral adnexa.

Size: 3.8 x 2.6 x 3.6cm (18.6cc)

Follicle count: 6 <10mm, 1 at 16mm.

No masses or endometriotic cysts.

Left ovary:

Position: Lateral adnexa.

Size: 3.6 x 2.2 x 3.3cm (13.7cc)

Follicle count: 7 <10mm.

No masses or endometriotic cysts.

Adnexa:

No tubal dilatation.

Physiologic volume fluid anterior and posterior cul-de-sac - no masses, adhesions or infiltrating endometriosis.

Other findings:

Normal morphology rectosigmoid colon, urinary bladder, urethra and levator ani musculature.

Radiologist: Dr F. Voyvodic