

RRI085

Accession Number: BR-3409405-MR
Requested Date: March 3, 2017 13:44
Report Status: Final
Requested Procedure: 3401802
Procedure Description: MRI PELVIS
Modality: MR

Referring Physician: DI LERNIA, MONICA
Organization: North Adelaide

Findings

Radiologist: VOYVODIC, FRANK

MRI PELVIS

Summary :

Stable fibrotic posterior cul-de-sac endometriosis with sigmoid serosal adhesions.

No haemorrhage glandular endometriotic disease identified.

Left posterior adnexal cyst seen on MRI September 2013 has resolved.

Clinical:

Endometriosis. Known remnant adherent to bowel.

Technique:

1.5T multiplanar MR imaging. Intravenous Buscopan. G2 P2. Total hysterectomy 2012. Small amount of residual ovarian tissue in situ.

Comparison Films:

MRI September 2013.

Findings:

Uterus:

Total hysterectomy.

Vagina:

Spiculated T2 hypointense fibrotic change noted at the right vaginal vault contacting sigmoid colon and pelvic side wall peritoneum not changed since MRI 6/9/2013.

No deeply infiltrating disease or haemorrhagic glandular deposits identified.

Subcentimetre Gartner's duct cyst right lateral vaginal wall unchanged.

Ovaries:

Bilateral salpingo-oophorectomy.

Significant residual ovarian tissue not identified.

No residual follicular activity.

The left posterior adnexal cyst seen on MRI September 2013 has completely resolved.

Adnexa:

Nil additional.

Other findings:

Sigmoid serosal tethering to vaginal vault fibrotic changes. No transmural bowel endometriosis. Normal morphology urinary bladder, urethra and levator ani musculature.

Dr Frank Voyvodic

Dr Steven Knox

Electronically signed 03/03/2017 17:20