

**ENDOMETRIOSIS ULTRASOUND:**

Our patient consented to a limited abdominal and full pelvic ultrasound examination using real-time transabdominal scan and transvaginal scan technique.

**INDICATION:** R/O Endo. Normal scan a clinic. Very symptomatic from pain during menses. Tolerable on CHC. Fertility treatment. Tried a few IUIs. Currently on stimulation. Planning IVF if not pregnant, infertility since Aug 2022.

**FINDINGS:****UTERUS:**

The uterus was well visualized, retroverted in orientation and size measuring 79 x 43 x 46 mm. Volume 81 ml.

**Myometrium:** The myometrium appeared normal.

- **Adenomyosis:** Evaluation for adenomyosis revealed: Nil.
- **Fibroids:** Evaluation for fibroids revealed: Nil.
- **Congenital anomaly:** Nil.

**Endometrium:** Endometrial thickness measured: 4.9 mm. Endometrial cavity pathology: None.

**OVARIES/ADNEXA:**

**Right Ovary:** the right ovary appeared normal in appearance and echogenicity, measuring 29 x 19 x 27 mm. Volume 7.6 ml. Peripheral hyperechoic foci, thus far of unclear etiology, but possibly superficial endometriosis.

**Right Ovary Mobility:** Mobile

**Left Ovary:** the left ovary appeared normal in appearance and echogenicity, measuring 31 x 20 x 28 mm. Volume 9.3 ml.

**Left Ovary Mobility:** Mobile

**Adnexa:** Normal bilaterally.

**ANTERIOR COMPARTMENT:**

M. Leonardi, MD, PhD, FRCSC

Date of transcription: 19 Jan 2024

Signed



**Bladder:** Normal with no evidence of deep endometriosis or other gross pathology.

**Ureters:** Normal bilaterally with no evidence of hydroureter.

**POSTERIOR COMPARTMENT:**

**Posterior vaginal fornix:** Normal with no evidence of deep endometriosis or other gross pathology.

**Rectovaginal septum:** Normal with no evidence of deep endometriosis or other gross pathology.

**Left uterosacral ligament:** Normal with no evidence of deep endometriosis or other gross pathology.

**Right uterosacral ligament:** **Nodule at the base of the ligament measuring 4.8 x 1.9 x 3.7 mm.**

**There is a second nodule noted in the right pouch of Douglas, close to the para-rectal space measuring 4.3 x 5.8 x 5.3 mm.**

**Torus uterinus:** Normal with no evidence of deep endometriosis or other gross pathology.

**Bowel:** Normal with no evidence of deep endometriosis or other gross pathology.

**Rectouterine pouch (cul de sac):** Sliding + Triangle sign: Positive, representing a non-obiterated (i.e. normal) rectouterine pouch.

**Superficial endometriosis:** Evaluation for superficial endometriosis today was aided by the presence of peritoneal fluid. We did identify superficial endometriosis on the right uterosacral ligament in the form of a small superficial cystic space and small hyperechoic foci.

**IMPRESSION:**

Abnormal limited abdominal and full pelvic ultrasound today with findings of endometriosis in the forms of two small nodules noted in the right uterosacral ligament and para-rectal space, as well as superficial endometriosis. There is no evidence of adenomyosis. Ovaries are normal and mobile and responding well to FSH stimulation.

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 experiences. I advised them to follow up with you, their referring doctor, to discuss management strategies going 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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