

RRI059

Accession Number: BR-4095996-MR
Requested Date: July 31, 2018 09:41
Report Status: Final
Requested Procedure: 4187528
Procedure Description: MRI PELVIS
Modality: MR

Home Phone:
Referring Physician: MATTHEWS, SARAH
Organization: North Adelaide

Findings

Radiologist: VOYVODIC, FRANK

MRI PELVIS**Summary :**

No MRI scan evidence of adenomyosis, leiomyoma or focal endometrial abnormality.

Normofollicular ovarian morphology.

No tubal dilatation or infiltrating cul-de-sac endometriosis.

Clinical:

Dysmenorrhoea. Heavy menses.

Technique:

1.5T multiplanar phased array surface coil MR. Intravenous Buscopan. Day 28 menstrual cycle. G0 P0.

Comparison Films:

Nil available.

Findings:**Uterus:****Morphology -**

Anteverted anteflex.

Convex external uterine fundal contour - no septum or duplication.

Size (Uterine and Corpus) -

6.3 x 4.7 x 4.3cm (67cc)

Cervical length 2.7cm.

Adenomyosis -

Submucosal microcysts not identified.

Anterior uterus max JZ thickness 4mm.

Fundal uterus max JZ thickness 4mm.

Posterior uterus max JZ thickness 4mm.

Leiomyoma -

Absent. In particular. no submucosal or endocavitary lesions.

Endometrium -

15mm thickness. No polyp, mass or adhesions.

Cervix -

Normal.

Vagina:

Normal posterior vaginal fornix and rectocervical septum. Normal morphology.

Ovaries:

Right vary -

Position: Lateral adnexa.

Size: 3.4 x 2.8 x 2.8cm (14.0cc)

Follicle Count: Twenty three less than 10mm, one at 16mm.

No mass or endometriotic cysts.

Left Ovary -

Position: Lateral adnexa.

Size: 2.4 x 2.2 x 1.8cm (5.0cc)

Follicle Count: Twenty less than 10mm.

No mass or endometriotic cysts.

Adnexa:

No tubal dilatation. No mass, adhesions or infiltrating cul-de-sac endometriosis.

Other Findings:

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

Dr Frank Voyvodic

Dr James Hopkins

Electronically signed 01/08/2018 07:11