



Patient Name:

**RRI035** 

Patient ID: Gender:

Date of Birth: Home Phone:

Referring Physician: VIDEON, CATHERINE

Organization:

City West

Accession Number: BR-3791876-MR

Requested Date: December 14, 2017 09:44

Report Status: Final
Requested Procedure: 3839023
Procedure Description: MRI PELVIS

Modality: MR

# **Findings**

Radiologist:

VOYVODIC, FRANK

## **MRI PELVIS**

# Summary:

Arcuate uterine configuration - no significant Mullerian duct anomaly.

No MRI scan evidence of adenomyosis, leiomyoma, tubal dilatation or infiltrating cul-de-sac endometriosis.

Normal follicular ovarian morphology.

#### Clinical:

Recurrent IVF failure.

#### Technique:

3T multiplanar MR imaging. Intravenous Buscopan. Day 21 menstrual cycle. G2P0.

## Findings:

#### **Uterus:**

#### Morphology:

Midline anteverted anteflexed.

Flat external fundal contour with arcuate uterine configuration, obtuse intercornual angle, intercornual distance <4cm and dept of myometrial indentation 9mm below the interostial line.

## Size:

(Corpus + cervix)

8.0 x 4.4 x 3.3cm (61cc)

## Adenomyosis:

No submucosal microcysts identified

Anterior uterus max JZ thickness 3mm

posterior uterus max JZ thickness 5mm

fundal uterus max JZ thickness 4mm.

Leiomyoma:





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Endometrium:

10mm thickness. No polyp, masses or adhesion.

Cervix:

Normal.

## Vagina:

Normal morphology. Normal posterior vaginal fornix. Normal rectovesical septum.

## **Ovaries:**

Right Ovary:

Position: Lateral adnexa.

Size: 2.5 x 3.3 x 2.9cm (12.5cc)

Follicle Count: 16 < 10mm, 1 at 13mm.

No mass or endometriotic cyst.

Left Ovary:

Position: Lateral adnexa.

Size: 3.0 x 4.1 x 2.3cm (14.8cc)

Follicle Count: 12 < 10mm, 1 at 14mm.

No mass or endometriotic cyst.

#### Adnexa:

No tubal dilatation. Physiologic volume fluid anterior and posterior cul-de-sac. No mass, adhesions or infiltrating cul-de-sac endometriosis identified.

## Other Findings:

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

Small cysts in the anterior perinium bilaterally at the vaginal introitus consistent with Bartholin duct cysts measuring up to 10mm on the left and 5mm on the right.

## <u>Dr Frank Voyvodic</u> <u>Dr Steven Knox</u>

Electronically signed 14/12/2017 17:14