



ENDOMETRIOSIS ULTRASOUND:

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

Due to difficulty conducting the exam transvaginally patient consented to proceed transrectally.

INDICATION: Endometriosis? Debilitating pain.

FINDINGS:

UTERUS:

The uterus was well visualized, retroverted in orientation and size measuring 74 x 37 x 46 mm. Volume 64 ml.

Myometrium: The myometrium appeared normal.

- **Adenomyosis:** Evaluation for adenomyosis revealed: Nil.
- **Fibroids:** Evaluation for fibroids revealed: Nil.
- **Congenital anomaly:** Nil. Confirmed on 3D ultrasound.

Endometrium: Endometrial thickness measured: 12.5 mm. Endometrial cavity pathology: None.

OVARIES/ADNEXA:

Right Ovary: the right ovary appeared normal in appearance and echogenicity, measuring 31 x 17 x 17 mm. Volume 4.5 ml.

Right Ovary Mobility: Mobile

Left Ovary: the left ovary appeared normal in appearance and echogenicity, measuring 31 x 13 x 12 mm. Volume 2.7 ml.

Left Ovary Mobility: Mobile

Adnexa: Normal bilaterally.

ANTERIOR COMPARTMENT:

M. Leonardi, MD, PhD, FRCSC

Date of transcription: 01 Apr 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: Normal with no evidence of deep endometriosis or other gross pathology.

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

Sliding sign: (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 identified: None. It is important to note that the absence of superficial endometriosis does not rule out superficial endometriosis.

IMPRESSION:

Normal limited abdominal and full pelvic ultrasound today with no findings including endometriosis and adenomyosis. No adhesions noted. It is important to note that the absence of superficial endometriosis does not rule out superficial endometriosis.

It is important to note that a normal pelvic ultrasound does not signify the patient is normal; rather, it simply means we have not visualized anatomical abnormalities in the structured evaluated on today's ultrasound.

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.

M. Leonardi, MD, PhD, FRCSC

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