



Patient Name: R

RRI390

Gender: Date of Birth: Home Phone:

Referring Physician: YOONG, RAY **Organization:** Salisbury

Accession Number: BR-5364804-MR

Requested Date: December 16, 2020 12:30

Report Status: Final
Requested Procedure: 5633632
Procedure Description: MRI PELVIS

Modality: MR

Findings

Radiologist: COWIE, JENNIFER

MRI PELVIS

Summary:

No MRI features of infiltrative endometriosis. Single fibroid. No endometrial lesions. Normal uterine morphology. Corpus luteum on the left.

Clinical:

Recurrent implantation failure. Check for adenomyosis.

Technique:

LMP day 23. Routine MRI pelvis.

Findings:

Uterus: Normal morphology. Anteverted anteflexed. No septum/ duplication.

Uterine size: $8.9 \times 5.0 \times 6.0 \text{cm}$.

Myometrium: Uterine fundus Leiomyoma, intramural; measuring 13mm. 4mm from mucosal surface. 4mm from serosal surface.

Junctional zone: No junctional zone abnormality is identified.

No submucosal microcysts identified.

Endometrium: Normal thickness. No endometrial lesions are identified on MRI.

Cervix: Small nabothian cyst, containing haemorrhagic content.

Ovaries:

Left ovary:

Position: Left adnexa.

Size: Normal.

Follicles: Corpus luteum is seen inferiorly measuring 21mm. Four further follicles are appreciated between 13mm and 6mm in size.

Right ovary:

Position: right adnexa
Size: 2.7 x 1.4 x 2.4mm.



Follicles: Four follicles are identified, the largest measuring 9mm.

Pelvis:

Moderate amount of free intraperitoneal fluid is seen, slightly right pelvis rather than left. No architectural distortion. No hydrosalpinx. No mass lesion is identified. No pelvic side wall lymphadenopathy.

Other findings:

Limited imaging of the remainder of the soft tissues. No gross focal mass lesion. No evidence of deep/infiltrative endometriosis.

Dr Jennifer Cowie Dr Steven Knox

Electronically signed 18/12/2020 10:54

Relevant Clinical Information SL-MRI PELVIS