



Patient Name:

**RRI025** 

Patient ID: Gender: Date of Birth: Home Phone:

Referring Physician: YOONG, RAY Organization: Salisbury

Accession Number: BR-4374065-MR
Requested Date: February 15, 2019 11:58

Report Status: Final 4506409
Procedure Description: MRI PELVIS

Modality: MR

# **Findings**

Radiologist: SHEKHAWAT, JATINDER

#### **MRI PELVIS**

## **Summary**:

- 1. Uterine adenomyosis with no evidence of infiltrating pelvic endometriosis
- 2. No ovarian endometrioma.
- 3. No uterine fibroids. No uterine septum or any mullerian duct abnormality.

## Clinical:

? Adenomyosis. Percutaneous implantation failure.

# **Comparison Study:**

No relevant previous images available for comparison.

## Technique:

Multi-parametric pelvic MRI fertility protocol including Volumetric 3D Coronal T2 plus reconstructions, T1 axial pre/post fat saturation.

## Findings:

## **Uterus:**

Size & Morphology: Anteverted. Size 70 x 10 x 59mm. Corpus to cervix ratio 3:1 approximately.

Endometrial Thickness: 7mm.

Junctional Zone: Diffuse JZ thickening.

<u>Uterine Lesions</u>: No evidence of leiomyoma. Lobulated myometrial contours with disparity in the size of anterior and posterior myometrium with posterior myometrium marginally thickened than anterior myometrium. Heterogeneous signal throughout the myometrium. No submucosal cyst.

# Cervix & Vagina:

Incidental nabothian cyst in the proximal cervix.

# Left Ovary:

Position: Slightly left of midline.





Size: Normal.

Follicles: <20.

Lesions and/or Endometrioma: Nil.

**Right Ovary:** 

Position: Right adnexal.

Size: Normal.

Follicles: <20. Dominant follicle noted measuring 19 x 17mm.

Lesions and/or Endometrioma: Nil

#### Adnexa:

No hydrosalpinx. No dilatation or abnormality of the fallopian tubes.

No inclusion cyst, pedunculated fibroids or any adnexal masses.

# Other Findings:

Degenerative disc disease at the lumbosacral articulation with disc desiccation at the L4-5 and L5-S1 level. No thickening of the urinary bladder wall. No free fluid in the pelvis.

Minor degenerative changes of the sacroiliac joints.

<u>Dr Frank Voyvodic</u> <u>Dr Jatinder Shekhawat</u>

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