

**Patient Name:** RRI004**Accession Number:** BR-2870580-MR  
**Requested Date:** December 24, 2015 13:38  
**Report Status:** Final  
**Requested Procedure:** 2786651  
**Procedure Description:** MRI PELVIS  
**Modality:** MR**Home Phone:**  
**Referring Physician:** MCLEAN, ANGELA  
**Organization:** North Adelaide

## **Findings**

**Radiologist:** KNOX, STEVEN

## **PELVIC MRI**

### **Summary :**

**Conventional uterine anatomy with no septum or duplication. No direct evidence of adenomyosis. Persisting posterior fundal contraction throughout the study favoured as physiologic rather than pathologic. No uterine lesion.**

**Normal ovarian follicular activity. No endometrioma. No hydrosalpinx. No pelvic anatomic distortion/ adhesion.**

### **Clinical:**

Ultrasound suggestive of adenomyosis, planning IVF.

### **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. No significant flexion. Size: 79 x 42 x 47mm. Conventional uterine anatomy with no evidence of septum or duplication. Persisting uterine contraction noted posteriorly at mid body throughout the study. Given the morphology of the uterine cavity related to this, favoured as physiologic rather than pathologic.

**Endometrial thickness:** ET = 11mm. No endocavitary pathology.

**Junctional zone:** Junctional zone is indistinct posteriorly which again is favoured as related to the uterine contraction given that there is mass effect exerted on the uterine cavity which is not seen with adenomyosis typically. Anterior JZ 4mm.

Fundal JZ 4mm. No submucosal microcysts as direct supportive features of adenomyosis.

**Uterine lesions:** Not identified.

**Cervix & Vagina:** No cervical or vaginal lesions identified.

#### **Left Ovary:**

**Position:** Left lateral adnexa.

**Size:** 24 x 14 x 23mm (4ml)

**Follicle(s):** Present. Approximately 6 subcentimetre follicles.

**Lesions and/or endometrioma:** Not identified.

#### **Right Ovary:**

**Position:** Right lateral adnexa.

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Size: 42 x 28 x 49mm. (30ml). Enlargement related to dominant follicular activity.

Follicle(s): Present. Approx. 4 subcentimetre follicles. Dominant follicle 31 x 29mm.

Lesions and/or endometrioma: Not identified.

**Adnexa:**

No hydrosalpinx. Uterosacral ligaments appear appropriate. No adnexal distortion. Free fluid layers appropriately within the posterior cul-de-sac.

**Other Findings:**

Degenerate lumbosacral spine. Annular disc bulges at L5-S1. No other significant pelvic findings.

Radiologist: Dr S. Knox

Second Reader: Dr F. Voyvodic