

Patient Name: RRI406
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: PERERA, KUDA
Organization: City West

Accession Number: BR-6019367-MR
Requested Date: February 10, 2022 09:14
Report Status: Final
Requested Procedure: 6380409
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: TOPHAM, DEAN

MRI PELVIS

Summary :

Slight interval reduction in size of the left ovarian endometrioma.

No new lesion is seen.

Clinical: Lower abdo discomfort/ left ovarian cyst. Elevated C 19-9. Follow up scan.

Technique:

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

Comparison Study:

Pelvic MRI 23/11/2021.

Findings:

Uterus:

Size & morphology: Anteverted retroflexed uterus noted. This measures 49 x 62 x 93mm.

Endometrium: Appears normal in thickness at 2mm. No endometrial polyp.

Junctional zone: Normal in thickness at 1mm. No background features of adenomyosis.

Uterine lesions: There are no adenomyoma or leiomyoma seen.

Cervix & vagina:

Appear normal. No restricted diffusion in the cervix or focal lesion. Vaginal fornices unremarkable.

Left ovary:

Position: Left adnexa.

Size: 29 x 25 x 35mm (estimated volume is 29ml).

Follicle(s): Physiological follicles are present but no features to suggest polycystic morphology.

Lesions and/or endometrioma: Well circumscribed lesion from the left ovary measuring 18 x 23mm noted. This appears slightly smaller when compared to the prior study. This appears high on T1 weighted sequences with some T2 shading and restricted diffusion. The appearances would be compatible with an endometrioma here. No new lesion seen.

Right ovary:

Position: Right adnexa.

Size: 21 x 16 x 34mm (estimated volume 6ml).

Follicle(s): Small physiological follicles were present but no dominant follicle is seen.

Lesions and/or endometrioma: No dermoid or endometrioma seen.

Adnexa/ POD:

Some free fluid is present within the pouch of Douglas and the right adnexa. The fat plane in the pouch of Douglas appears preserved. Slight thickening of the uterosacral ligament again noted but similar in appearance to the prior study. There is no evidence of deep infiltrating endometriosis on this study today with normal appearance to the rectum and bladder. Screening through the upper abdomen did not demonstrate any abnormality. There is no hydronephrosis. Presumably extra renal pelvis in the left kidney noted. Lung bases are clear.

Other findings:

Dr Dean Topham

Electronically signed 10/02/2022 15:25

Relevant Clinical Information

CW-MRI PELVIS