

Patient Name: RRI104
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: TREMELLEN, KELTON
Organization: Ashford

Accession Number: BR-2819835-MR
Requested Date: November 12, 2015 09:31
Report Status: Final
Requested Procedure: 2728832
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: KNOX, STEVEN

MRI PELVIC

Summary :

The uterine fibroid measurements are smaller than on the previous HyCosy from 2013 although some of this will be technical.

The most significant lesion to the cavity is the anterior central mid uterine body fibroid which is intramural/ submucosal. It is non degenerate and non suspicious based on MRI characteristics.

Ovarian follicular activity and normal physiologic fluid. No posterior cul-de-sac endometriosis or other abnormality is seen. No hydrosalpinx.

Clinical:

Ultrasound shows submucosal fibroid before last pregnancy. Please reassess. History of possible red degeneration of pregnancy.

Comparison Study:

HyCosy 17/4/2013.

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 retroflexed. No evidence of significant scar thinning with around 6mm intervening scar tissue present. Prior LSCS. Size (uterine body and cervix) 86 x 57 x 63mm. Conventional anatomy with no septum or duplication.

Endometrial thickness:

ET = 7mm. There is anterior mid uterine body cavity distortion from the regional intramural/submucosal fibroids.

Junctional zone:

Appropriate thickness throughout. No submucosal microcysts or features of adenomyosis. JZ average 2mm.

Uterine lesions:

1. Anterior mid uterine body intramural/submucosal. >50% intramural - FIGO 2. Approximately 80% intramural. Size 18 x 14 x 14mm (previous 37 x 34 x 36mm). Non degenerate non suspicious. 8mm from serosal surface.
2. Left paramedian posterior uterine body/fundal intramural with broad serosal bulge. FIGO 4. 27 x 27 x 27mm (previous 37 x 30 x 30mm). 5mm from serosal surface. 7mm from mucosal surface. Non degenerate non suspicious. Mild mass effect around the left cornua.

3. Posterior central intramural. FIGO 4. 6mm diameter. 8mm from mucosal surface. 7mm from serosal surface. No cavity significance.

Cervix & Vagina:

Bilateral small Bartholin gland cysts. No significant findings.

Left Ovary:Position:

Left lateral adnexa.

Size:

45 x 18 x 31mm (13ml). Enlargement related to dominant follicular activity.

Follicle(s):

Present. Seven follicles subcentimetre. Single follicle 15 x 11mm.

Lesions and/or endometrioma:

Not identified.

Right Ovary:Position:

Right superior adnexa/lower pelvis lateral.

Size:

36 x 21 x 14mm (5.5ml).

Follicle(s):

Present. Five subcentimetre follicles.

Lesions and/or endometrioma:

Not identified.

Adnexa:

Free fluid lies appropriately within the posterior cul-de-sac. The uterine retroflexion is favoured as related to prior section/physiologic with no deep posterior cul-de-sac infiltrative endometriosis or other regional abnormality identified. Normal physiologic fluid within the anterior and posterior cul-de-sacs. No hydrosalpinx. No pelvic side wall endometrioma. Uterosacral ligaments appear appropriate on these views with no gross nodularity or spiculation.

Other Findings:

Nil significant.

Radiologist: Dr S. Knox

Second Reader: Dr F. Voyvodic