



Patient Name:

RRI154

Patient ID: Gender: Date of Birth:

Referring Physician: MCLEAN, ANGELA North Adelaide

Organization:

Home Phone:

BR-3509454-MR May 22, 2017 11:09

Report Status: Final Requested Procedure: 3516161 **Procedure Description:** MRI PELVIS

Modality: MR

Accession Number:

Requested Date:

Findings

Radiologist:

CHONG, WOON KIT

MRI PELVIS

Summary:

Persistent abnormality anterior uterus junctional zone ? contraction ?? adenomyosis

Limited repeat scan will be arranged to differentiate.

No Mullerian duct abnormality, endometriomas, hydrosalpinx or pelvic adhesions. A small amount of fluid in the pelvis thought within physiological limits.

Clinical:

Recurrent failure of implantation. Known endometriosis. Adenomyosis. ?

Technique:

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

Findings:

Uterus:

Size & morphology:

65cc (3.7 x 4.2 x 8cm). Anteverted. No Mullerian duct abnormality.

Endometrial thickness: 8mm

Junctional zone:

Anterior maximal junctional zone thickness�14mm

Posterior maximal junctional zone thickness�4mm

Fundal maximal junctional zone thickness�4mm

Persistent anterior junctional zone thickening reflecting diffuse adenomyosis anteriorly. Uterine contraction thought less likely.

Uterine lesions: Nil.

Cervix & vagina:



Nabothian cysts at the endocervical canal. Otherwise no morphological abnormalities.

Left ovary:

Position: � Lateral adnexa.

Size: �2.6cc (1.9 x 2.2 x 1.2cm)

Follicle(s): �10. Subcentimetre.

Lesions and/or endometrioma: Nil.

Right ovary: �

Position: � Lateral adnexa.

Size: �8.7cc

Follicle(s): 10. Subcentimetre.

Lesions and/or endometrioma: Nil.

Adnexa:

No hydrosalpinx.

Other findings:

A small amount of fluid within the pelvis thought within physiological limits.

<u>Dr Woon Kit Chong</u> <u>Dr Frank Voyvodic</u>

Electronically signed 23/05/2017 08:57