



**Patient Name:** 

**RRI392** 

Patient ID: Gender: Date of Birth:

**Home Phone:** 

Referring Physician: BEHNIA-WILLISON, FARIBA City West

Organization:

**Accession Number:** BR-5821720-MR

Requested Date: September 30, 2021 15:13

Report Status: Final Requested Procedure: 6155786 **Procedure Description:** MRI PELVIS

Modality: MR

# **Findings**

Radiologist:

VOYVODIC, FRANK

## **MRI PELVIS**

# **Summary**:

Arcuate configuration - no uterine septum or duplication.

No MRI scan evidence of uterine adenomyosis, fibroids nor infiltrating endometriosis.

Bilateral polycystic ovarian morphology - this finding has high incidence in this age group and may not be clinically significant.

## Clinical:

Exclude Mullerian duct anomaly or endometriosis.

#### Technique:

3T multiplanar MR imaging. Intravenous buscopan. Day 22 menstrual cycle. G0P0.

## Findings:

#### **Uterus:**

#### Morphology:

Midline anteverted anteflexed.

Convex external uterine fundal contour with arcuate configuration - no septum or duplication.

Size (corpus plus cervix):

8.9cm x 6.6cm x 4.7cm (145cc)

# Adenomyosis:

Submucosal microcyst not identified.

Thin junctional zone throughout (3-4mm).

# Fibroids:

Nil.

In particular, no submucosal or endocavitary lesions.

#### Endometrium:



No polyp, mass or adhesions.

8mm thickness.



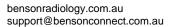
<u>Cervix</u> :
Normal.
Vagina:
Normal morphology.
Normal posterior vaginal fornix.
Normal rectocervical septum.
Ovaries:
Right ovary:
Position: Lateral adnexa.
Size: 2.4cm x 3.1cm x 2.4cm (9.3cc)
Follicle Count: Over 30 subcentimetre.
No mass or endometriotic cyst.
Left ovary:
Position: Lateral adnexa.
Size: 3.0cm x 3.1cm x 2.8cm (13.6cc)
Follicle Count: Over 25 less than 10mm, one at 21mm.
No mass or endometriotic cyst.
Adnexa:
No tubal dilatation.
Normal urinary bladder.
No distal ureteric nodules.
Patent posterior cul-de-sac with small volume of fluid within physiologic limits.
No infiltrating endometriosis.
No rectosigmoid abnormality.

# Normal lumbosacral spine.

Other findings:

**Dr Frank Voyvodic**Electronically signed 01/10/2021 17:33

Normal morphology urethra and levator ani musculature.





Relevant Clinical Information CW-MRI PELVIS