



Patient Name:

**RRI036** 

Patient ID: Gender: Date of Birth: Home Phone:

Referring Physician: VIDEON, Catherine

Organization: AS

Accession Number: BR-2367576-MR
Requested Date: October 28, 2014 11:21

Report Status: Final 2214460
Procedure Description: MRI PELVIS

Modality: MR

# **Findings**

Radiologist: JENKINS, MELISSA

## **MRI PELVIS**

#### Clinical:

Infertility. Past history endometriosis. Ectopic with right salpingectomy.

#### Technique:

Multi-parametric pelvic MRI fertility protocol. IV Buscopan. G2P0. Past history right salpingectomy, D&C and removal of endometriosis noted.

## Findings:

#### **Uterus:**

Size & Morphology: 68cc (70x36x52mm) anteflexed. Normal external uterine contour. No septum or duplication.

Endometrium: 12mm endometrial thickness. No internal uterine contents.

<u>Junctional Zone</u>: Single tiny submucosal microcyst present in the left cornua represents a small focus of superficial adenomyosis. No focal junctional zone thickening.

Maximal JZ thickness as follows:

Anterior JZ: 6mm

Fundal JZ: 6mm

Posterior JZ: 7mm

Uterine Lesions: None identified.

### Cervix & Vagina:

Unremarkable.

### Left Ovary:

Position: Left adnexa.

Size: 8cc (2.6x2.6x2.3cm)

Follicle(s): Approximately 15 follicles at 7mm or less.

Lesions and/or endometrioma: None identified.

# **Right Ovary:**





Position: Right adnexa.

Size: 12cc (2.9x2.6x3.1cm)

Follicle(s): Approximately 14 at 8mm or less. Collapsed follicle of 11mm.

Lesions and/or endometrioma: None identified.

#### Adnexa:

No hydrosalpinx. No gross regional distortion or deep/infiltrating endometriotic deposits evident.

# Other Findings:

Normal appearing bladder, urethra and rectum. Some disc dehydration at L5/S1 with small annular tear.

#### Conclusion:

No deep/infiltrating endometriotic deposits or gross regional adhesions on the current study.

No endometrioma or uterine lesion.

A single tiny submucosal microcyst in the left cornual region may reflect some superficial adenomyosis but there is no gross junctional zone expansion.

Radiologist: Dr M. Jenkins

Second Reader: Dr F. Voyvodic