

Patient Name: RRI105
Patient ID:
Gender:
Date of Birth:
Home Phone:
Referring Physician: DAVIES, TRICIA
Organization: North Adelaide

Accession Number: BR-5050551-MR
Requested Date: June 5, 2020 11:36
Report Status: Final
Requested Procedure: 5279500
Procedure Description: MRI PELVIS
Modality: MR

Findings

Radiologist: VOYVODIC, FRANK

MRI PELVIS

Summary :

No MRI scan evidence of adenomyosis, Mullerian duct anomaly or leiomyoma.

Normofollicular ovarian morphology with small endometriotic cyst or haemorrhagic follicle left ovary.

No tubal dilatation or features of infiltrating pelvic endometriosis.

Clinical:

Fertility assessment.

Technique:

1.5T multiplanar phased array surface coil MR imaging study.

Intravenous Buscopan.

Day 23 menstrual cycle.

G0 P0.

Findings:

Uterus:

Morphology:

Midline anteverted anteflexed.

Convex external uterine fundal contour - no septum or duplication.

Arcuate configuration.

Size (uterine corpus):

5.8 x 5.8 x 3.3cm (58cc)

Adenomyosis:

No submucosal microcyst identified.

Normal junctional zone thickness (4-5mm throughout).

Leiomyoma:

Absent.

In particular, no submucosal or endocavitary lesions.

Endometrium:

Thickness 8mm.

No polyp mass or adhesions.

Cervix:

Small nabothian cysts internal and external os.

Nil significant.

Vagina:

Normal morphology.

Normal recto-cervical septum.

Normal posterior vaginal fornix.

Ovaries:Right ovary:

Position:Lateral side wall.

Size:3.2 x 3.1 x 3.1cm (16.1cc)

Follicle Count:7 <10mm.1 at 31mm.

No mass or endometriotic cyst.

Left ovary:

Position: Left lateral pelvis.

Size: 3.1 x 1.7 x 2.1cm (5.8cc)

Follicle Count: 13 <10mm.

11mm T1 hyperintense T2 hypointense ?endometriotic cyst.

Adnexa:

No tubal dilatation.

No mass adhesions or infiltrating endometriosis.

Physiologic volume fluid posterior cul-de-sac ie not obliterated.

Anterior pelvis normal.

Other findings:

Normal morphology urinary bladder urethra and levator ani musculature.

Dr Frank Voyvodic

Electronically signed 06/06/2020 09:11