

**Patient Name:** RRI073**Accession Number:** BR-3439515-MR  
**Requested Date:** March 27, 2017 16:28  
**Report Status:** Final  
**Requested Procedure:** 3436313  
**Procedure Description:** MRI PELVIS  
**Modality:** MR**Home Phone:**  
**Referring Physician:** BEDSON, LISA  
**Organization:** North Adelaide**Findings****Radiologist:** COWIE, JENNIFER**MRI PELVIS****Summary:**

There is some fibrotic material with cysts and some minor tethering about the site of previous C-section scar. No focal abnormality otherwise. Mild arcuate morphology.

**Clinical:**

Recurrent IVF. ?adenomyosis/hydrosalpinx/other. Ultrasound showed cyst in LSCS scar.

**Technique:**

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

**Findings:****Uterus:**

Size & morphology: 7.5 x 3.9 x 4.7cm (76cc). Mild arcuate morphology.

Endometrial thickness: 8mm.

**Junctional zone:**

Anterior JZ 7mm

Fundal JZ 3mm

Posterior JZ 7mm. No submucosal microcyst identified.

**Uterine lesions:**

No myometrial lesion identified. There is a 12mm mildly T1 hyperintense cyst within the cervical scar. Additional tethering cysts at the level of the scar are also appreciated, with a degree of obliteration of the canal at this point.

**Cervix & vagina:** Normal.

**Left ovary:**

Position: Left adnexa

Size: 2.3 x 2.4 x 3.4cm. (9.8cc)

Follicle(s): Large collapsing 18mm corpus luteum. Additional 13 follicles < 1cm.

Lesions and/or endometrioma: None seen.

**Right ovary:**

Position: Right adnexa.

Size: 3.5 x 1.8 x 2.7cm (9cc)

Follicle(s): 12mm para ovarian cyst. Additional 13 follicles all 10mm or under.

Lesions and/or endometrioma: Low T1 signal on the para ovarian cyst. No endometriomata seen.

**Adnexa:**

No significant free fluid.

**Other findings:**

Prominent L5-S1 disc with annular tear.

Dr Jennifer Cowie

Dr Melissa Jenkins

Electronically signed 29/03/2017 14:26