Exam Date:	19-07-2024

US, ABDOMINO-PELVIC

Clinical information: Pelvic pain with dysmenorrhea. Long cycles. LMP on 05/07/2024.

Findings:

The liver is of normal size measuring 13 cm on the mid clavicular line showing normal echotexture. No biliary tree dilatation.
The gallbladder presents a thin regular wall and a clear content.
The pancreas is unremarkable.
The spleen is of normal size and echotexture measuring 11.7 cm.
The kidneys are of normal size measuring 11.9 x 4.5 cm on the right side and 13.6 x 4.1 cm the left showing normal cortical thickness and cortico-medullary differentiation.
No urinary tract dilatation.
The aorta is of normal caliber.
No abdominal or pelvic fluid effusion.
The bladder presents a thin regular wall and a clear content holding a volume of field 300 at the time of the exam. No postvoid residue.
Presence of a large hypoechoic well-circumscribed mass of the pelvis on the midline and grossly measuring 14 x 12 x 7 cm demonstrating low-level echoic homogeneous echotext compressible under the probe with no vascularity on color Doppler; findings are consister with a large cyst with hemorrhagic content most probably arising from the left ovary. It is seen in contact with the uterine fundus in bladder repletion, becoming anterior to the ute and pushing it posteriorly after bladder emptying confirming its adnexal origin.
The uterus is anteverted measuring 7.4 x 5.7 x 2.9 cm with unremarkable appearance of t myometrium. The cavity stripe is regular measuring 9 mm in thickness.
The right ovary is normal in size measuring 42 x 25 x 23 mm (12.9 ml) showing an 18 mm simple follicle.
The left ovary is less well identified appearing laminated in contact with the above-menti mass, measuring 34 x 21 x 11 mm (4.1 ml).

Impression:

14-cm pelvic cystic mass, appearing to be independent from the uterus, most probably originating from the left ovary, with features mainly suggestive of an endometrioma.
A pelvic MRI is recommended for better tissue characterization and pelvic assessment.

Exam Date:	12-08-2024

MRI of the pelvis performed on 12/08/2024:

Clinical information:
Large uterus.

Technique:
Magnetic resonance imaging of the pelvis was performed on a 3Tesla magnet utilizing the following sequences: Axial, coronal, and sagittal T2-weighted images, axial T1-weighted images pre and post fat suppression as well as diffusion weighted images, dynamic T1 fat suppressed images following contrast administration as well as sagittal T1 fat suppressed images following contrast administration.

Findings:

Uterus:
The uterus is retroverted, measuring 6.5 x 3.2 x 5 cm.
The endometrium is homogeneous measuring 5 mm in thickness.
The junctional zone measures 9 mm in thickness without focal thickening.
No identified uterine fibroid.

Cervix:
Unremarkable

Ovaries:
The right ovary is normal in size measuring 3.2 x 1.5 x 4 cm showing multiple small follicular cysts.
Enlarged left ovary measuring 12.6 x 8.9 x 12.6 cm showing a large hypointense mass on T2-weighted images appearing hyperintense on T1-weighted images and T1 fat sat and showing no internal enhancement in keeping with a large endometriosis. A smaller left ovarian endometriotic lesion of similar signal intensity is seen posterior to the previously described on measuring 17 x 16 mm.

Fluid:
Mild amount of free fluid in the pelvis.

Lymph nodes:
No pelvic lymphadenopathy.

Other intrapelvic structures:
Focal small nodular hypointense lesion seen at the right uterosacral ligament, suggestive of deep pelvic endometriosis.
The urinary bladder is under distended, limiting its analysis. Normal visualized bowel loops.

Musculoskeletal system:

Normal bone marrow signal. No disproportionate muscle atrophy.

Impression:

Two left ovarian endometriotic lesions, the largest measuring up to 12.6 cm.

Report Read By: Jalal El Karaaoui, MD

Approval Date: 13-08-2024 11:51:47 AM

Approved/Electronically validated: Tamina Elias-Rizk, MD