**MRI Gynae template**

**Sequences:**

* T2W HASTE - Coronal
* T2W axial – Axial & coronal
* T1W VIBE FS axial
* T1W Pre and post contrast (For follow-up scans)

**Uterus:**

Multi fibroid uterus measuring (TRV x AP x CC).

The uterus contains multiple T1W hypointense and T2W hypointense fibroids.

The largest fibroid measures mm x mm x mm.

Subserosal fibroids:

Pedunculated fibroids.

Submucosal fibroids:

Intracavitatory fibroids:

Cervical fibroids:

No evidence of intrinsic hyaline degeneration.

No evidence of intrinsic red degeneration.

No evidence of associated calcification.

No evidence of residual fibroid enhancement.

No suspicious or aggressive features to suggest malignancy.

There is compression/displacement of …

The transition zone is normal (measuring ) with no evidence of focal or diffuse adenomyosis.

No congenital uterine abnormalities.

**Uterine arteries:**

Bilateral hypertrophy and tortuosity of the uterine arteries bilaterally with no obvious ectopic origin.

**Endometrial cavity:**

The endometrial cavity is normal.

Small amount of endometrial fluid/haemorrhage which may be cyclical.

**Cervix:**

Normal cervical canal with no suspicious masses.

**Ovaries and Fallopian tubes:**

No hydrosalpinx.

Normal ovaries with no suspicious solid or cystic masses.

No evidence of polycystic ovarian syndrome.

No evidence of endometriosis.

**Parametria and Pouch of Douglas:**

No endometrial deposits, collections or fluid.

No parametrial venous congestion.

**Pregnancy?**

No features to suggest an intrauterine or ectopic pregnancy.

**Additional pelvic structures:**

No hydroureter in the visualized lower ureters.

The bladder is normal.

The rectum is normal and not compressed.

No free fluid or collections.

No suspicious pelvic, iliac or inguinal lymphadenopathy.

**Pelvis:**

Normal marrow signal in the visualized pelvic bones.

Normal pelvis musculature.

**Comments:**

1. **Multifibroid uterus. The patient would be a candidate for Uterine Artery Embolisation/ UAE pre myomectomy.**
2. **No submucosal or subserosal fibroids.**
3. **No evidence of adenomyosis or suspicious pathology to suggest underlying malignancy.**