



Expanded Use of MRI for Limited Pelvic Exam Offers Definite Advantages Over Ultrasound

WIS is continually striving to extend the services we offer by adding new imaging technology and by expanding the capabilities of existing imaging technology. Traditional imaging exams in one technology give way to newer exams in another technology that offer better diagnostic yield. While pelvic ultrasound is the traditional and primary study of choice in a number of emergent and obstetric presentations, MRI is fast becoming the preferred imaging modality in many conditions affecting the female reproductive system.

An MRI exam of the pelvis has proven to yield greater diagnostic information than traditional trans-vaginal and trans-abdominal ultrasound exams. The image resolution from MRI is remarkable and affords WIS radiologists detailed insights into anatomical structures.

The new exam requires a significantly smaller number of MRI sequences than a standard pelvic MRI and is less costly. Unlike a pelvic and endovaginal ultrasonography, the exam involves little or no patient discomfort. This exam, aptly called a "Limited Pelvic MRI" takes just 20 minutes, and normally requires no intravenous contrast administration or sedation, nor is the patient subject to any radiation exposure.

A "Limited Pelvic MRI" exam should be considered for the following conditions and presentations:

Conditions

- Endometriosis
- Endometrial cancer staging
- Ovarian neoplasms
- Staging of other pelvic tumors where PET/CT may be not indicated (bladder, urethral)
- Congenital uterine anomalies
- Evaluation prior to fibroid embolization

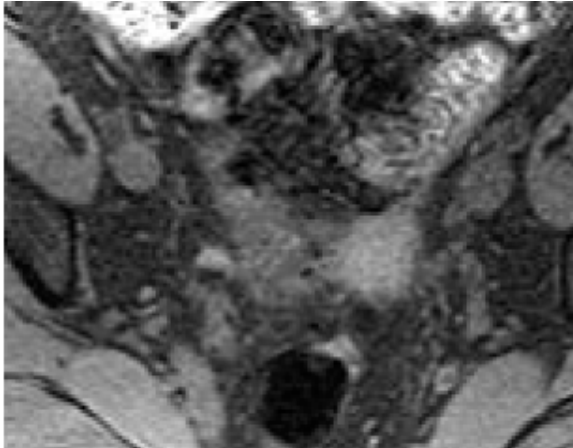
Presentations

- Chronic pelvic pain
- Dysfunctional uterine bleeding
- Resolution of a CT/Ultrasound discrepancy
- Ovarian, endometrial, urethral and other pelvic tumor diagnosis and staging
- Infertility / suspected uterine anomaly
- Incontinence/suspected pelvic floor relaxation

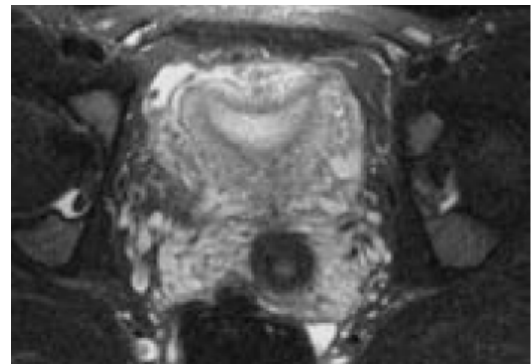
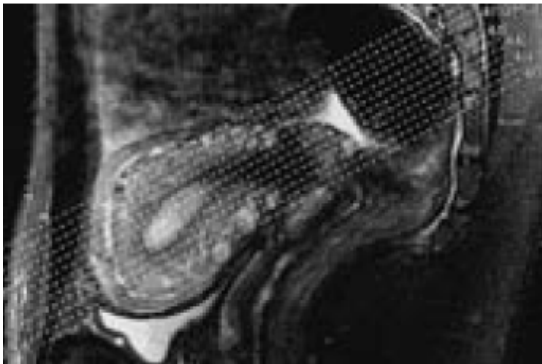
DID YOU KNOW?



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MRI image of a mass at the vaginal cuff in a patient with recurrent endometriosis.



Above are examples of angled axial oblique Limited MRI images of the endometrial cavity, which in this case allows for the diagnosis of a subtle acute uterine anomaly.

If you have any questions or for additional information, please contact Brandie Ellington at 425-688-0100, ext. 109 or Gary Beneze at gbeneze@washingtonimaging.com.

Information for this piece gathered from Medscape, AuntMinnie.com, the ACR, ACOG and the NIH.

