EXAM: MRI DEFECOGRAPHY (PELVIS) W/O IV CONTRAST

HISTORY: [] years -old [female/male] with []

TECHNIQUE: [] cc of ultrasound gel was instilled into the rectum. Multiplanar MRI of the pelvis was performed utilizing [enter specific protocol]. All images were obtained with patient in [supine/upright/other] position.

IV Contrast: None

COMPARISON: [Any prior study used for comparison]

## FINDINGS:

Anatomic Evaluation: [Report anatomic findings including pertinent surgical changes (hysterectomy), urethral slings, vaginal mesh, urethral bulking agent. Discuss appearance of levator anatomy]

**Functional Evaluation:** 

Patient [did/did not] defecate adequately during the examination. Landmark used for evaluation of prolapse: Pubococcygeal line

H line (levator hiatus)

Rest: [] cm (normal <=5 cm). Defection/Maximal strain: [] cm.

M line (anorectal junction location relative to PCL)
Rest: [] cm [above/below] (normal <=2 cm below).
Defecation/Maximal strain: [] cm [above/below]

Above findings are consistent with <a href="mailto:rno/grade1/grade2/grade3">[normal/low lying]</a> anorectal junction at rest with <a href="mailto:rno/grade1/grade3">[no/grade1/grade3]</a> widening and <a href="mailto:rno/grade1/grade2/grade3">[no/grade1/grade2/grade3]</a> descent during defectation/maximal strain.

#### Anterior Compartment

Bladder base location relative to the PCL:

Rest: [] cm [above/below]

Defecation/Maximal strain: [] cm [above/below]

Findings are consistent with [no/grade1/grade2/grade3] cystocele.

Urethral hypermobility: [present/absent]

### Middle Compartment

[Vaginal apex/cervix] location relative to PCL:

Rest: [] cm [above/below]

Defecation/Maximal strain: [] cm [above/below]

This is consistent with <a href="mailto:rooks">[no/grade1/grade2/grade3]</a> vaginal prolapse.

# Posterior Compartment

[Anorectal/Levator-plate] angle

Rest: [] degrees; Kegel: [] degrees; Defecation/Maximal strain: [] degrees. Findings consistent with [normal/narrowed/widened] resting angle [with/without] expected narrowing during Kegel and [expected widening/paradoxical contraction] during defecation/maximal strain.

Rectal Intussusception: [present/not present]

[If present – full thickness vs. partial thickness.

If full thickness, provide level – intra-rectal, intra-anal, or extra-anal prolapse].

Rectocele: [Present/Absent] Rectocele size: [] cm AP.

Findings are consistent with [no/grade1/grade2/grade3] rectocele

Peritoneocele/Enterocele/Sigmoidocele: [Present/Absent]

Distance below PCL: [] cm.

Findings are consistent with [no/grade1/grade2/grade3]

[peritoneocele/enterocele/sigmoidocele].

Other: [Incidental findings as appropriate].

### IMPRESSION:

- 1. Anatomic findings
- 2. Anterior compartment findings
- 3. Middle compartment findings
- 4. Posterior compartment findings