

1 of 2



Assoc.Prof Rob Cincotta  
Provider No. 024907WJ

Dr Jackie Chua  
Provider No. 227693UL

Dr Carol Portmann  
Provider No. 064664MF

Dr Alexa Bendall  
Provider No. 296217RW

LSPN 11492

Dr Neil Astill  
Obstetrician and Gynaecologist  
259 McCullough Street  
Sunnybank QLD 4109

Exam date:  
28/05/2024

**HyFoSy**

<b>Patient:</b>	<b>Takara Raymond DOB: 18/06/1991</b> 4 Chester Court, Petrie QLD 4502
<b>Indication</b>	Investigation for tubal patency
<b>History</b>	<b>General</b> low AMH 1.1 <b>History</b> <b>OB History</b> <b>Gravida 1. Para 0</b> Miscarriages 1
<b>Assessment</b>	LMP on 20/05/2024. Day of cycle 9. Cycle: regular cycle. Bleeding: normal. Contraception: none
<b>Method</b>	GE Voluson E10 , Transabdominal and transvaginal ultrasound examination . View: Adequate
<b>Uterus</b>	Size 69 mm x 50 mm x 40 mm. Vol 72.2 cm <sup>3</sup> Position: retroverted Myometrium: normal Endometrium: proliferative. Endometrial thickness, total 6.9 mm Cervix details: normal No polyps identified <b>Fibroid(s)</b> Size 24 mm x 18 mm x 17 mm. Mean 19.5 mm. Vol 3.8 cm <sup>3</sup> . Subserous. Anterior
<b>Genital Tract Anomalies</b>	No Mullerian anomaly demonstrated.
<b>Right Ovary</b>	Visualised. Morphology: Low level follicular activity. Size 29 mm x 20 mm x 16 mm. Vol 5.0 cm <sup>3</sup> No cysts identified Reduced mobility on probe palpation to the pelvic side wall and patient is tender upon probe palpation, contains 3 follicles including a 14mm leading follicle
<b>Left Ovary</b>	Visualised. Morphology: low level follicular activity. Size 25 mm x 20 mm x 20 mm. Vol 5.3 cm <sup>3</sup> No cysts identified Mobile and non-tender, contains 3 follicles
<b>Pouch of Douglas</b>	Free fluid visualised: mild Uterosacral ligaments - not tender on probe palpation, Sliding sign present, No ultrasound evidence of deep infiltrating endometriosis

Level 4, 7-11 Short Street  
Southport QLD 4215

Postal Address:  
PO Box 258  
Spring Hill QLD 4004

Ph 07 55282934  
Fax 07 55 283849  
www.qufw.com.au



## 2 of 2

## Right Kidney

Visualised

## Left Kidney

Visualised

## Procedure

HyFoSy performed using Exem Foam

No complications

Saline infusion - No intracavity pathology or Mullerian anomaly identified.

Bilateral fill and spill demonstrated.

Pregnancy test negative

## Comment

The bowel was assessed and no focal endometriotic lesions were identified.

The bladder was visualised, and the bladder wall appears normal. A dynamic assessment showed the bladder moving independently to the anterior wall of the uterus.

The distal portion of the ureters were noted bilaterally, and appeared normal.

## Diagnosis

HyFoSy - bilateral tubal patency. Normal fibroid pelvic scan



Dr Jackie Chua  
MBBS FRANZCOG DDU COGU  
Reporting specialist

Fiona Lu  
Sonographer

CC: Ms Raymond, Takara, Petrie

