

Ellen Health
Dr Tahira Bhatti
Fremantle WA 6160

10/07/2025

Dear Tahira

Pelvic Ultrasound Examination

Patient: **Alana D'ASCANIO**, DOB: 10/10/1994 Patient ID: 151456
3 Teatro Street, Beeliar WA 6164

Indication Heavy menstrual bleeding, new onset.
Day 18 of regular 32 day cycle.
Para 1 (NELUSCS) in 2022

Assessment LMP on 23/06/2025. Cycle: Regular. Cycle length 32 d. Bleeding: Menorrhagia. No dysmenorrhea. Bleeding duration 4 d to 5 d. No IMB. No dyspareunia.

Method Transabdominal and transvaginal ultrasound examination (verbal consent given). View: Sufficient.

Uterus Size 87 mm x 55 mm x 43 mm. Vol 109 cm³
Normal shape and morphology seen in 3D.
normal mobility
non tender
Position: Anteverted.
Myometrium: 7 mm of residual myometrium at LUSCS scar
No focal lesion or niche defect seen.
Endometrium: avascular, uniform and linear.
Consistent with secretory phase of cycle. Endometrial thickness, total 10.0 mm
Cervix details: Normal.
No fibroids identified

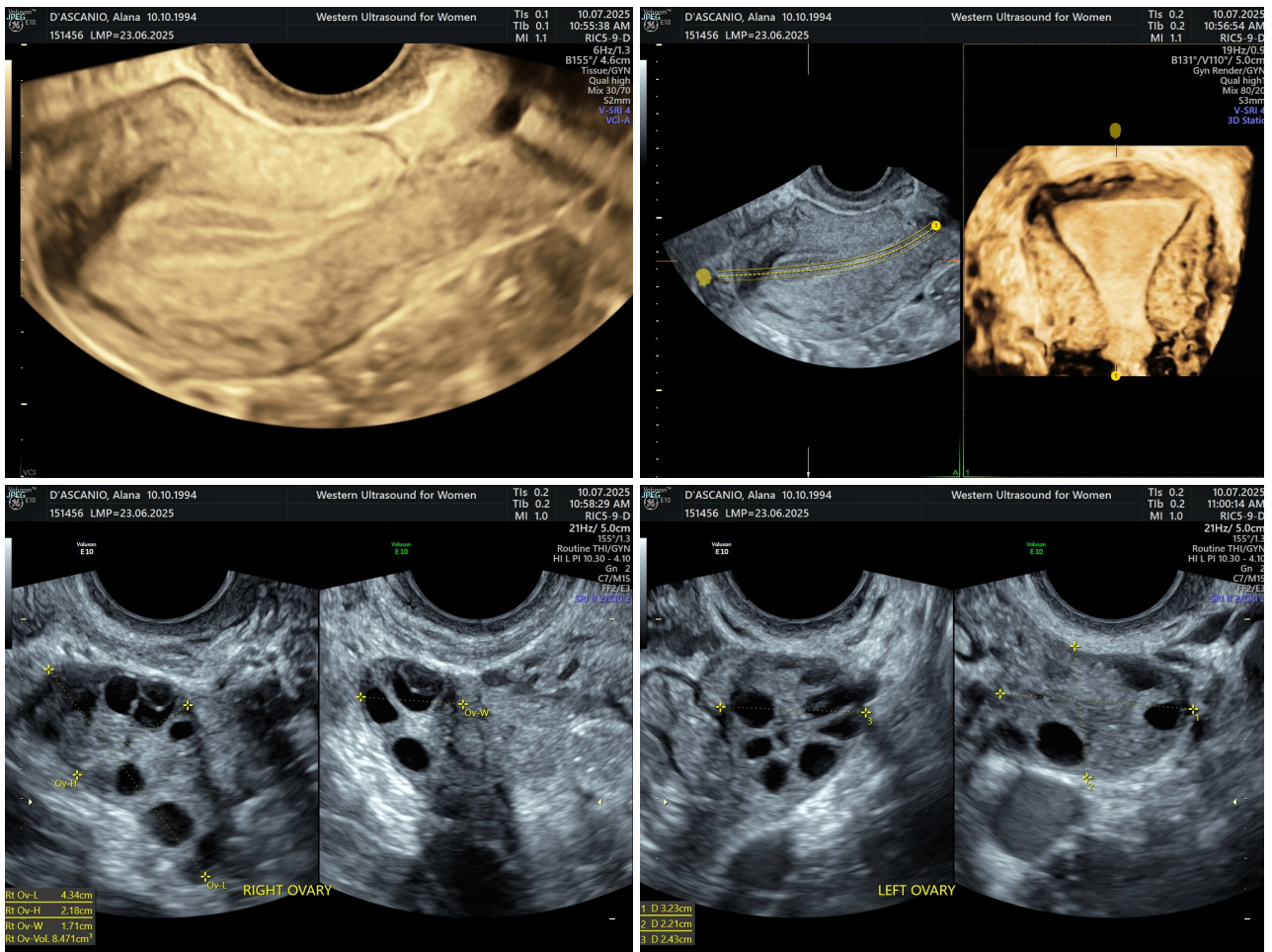
Right Ovary Size 43 mm x 17 mm x 22 mm. Vol 8.5 cm³
contains 19 antral follicles. Normally positioned and mobile

Left Ovary Size 40 mm x 25 mm x 26 mm. Vol 14.0 cm³
contains an 18 mm corpus luteum and 24 antral follicle (2-9 mm). Normally positioned and mobile

Adnexae Normal

PoD Normal. No free fluid.
no focal pathology seen on the USLs
Distal ureters and uterovesical fold mobility appears normal.

Conclusion Normal uterine anatomy and no endometrial pathology. No scar niche defect.
Left ovary has polycystic morphology. Please correlate with clinical and biochemical profile for diagnosis of PCOS.



Kind regards

Chhaya Mehrotra

Dr Chhaya Mehrotra
MBBS,FRANZCOG,DDU

C. Dry
Sonographer