

GYN Report

Patient Information

Patient Name: 8808410432
Birth Date: 25-07-1995
Ethnicity:
Comments:

Patient ID: 30042
Gender: Female

Exam Date: 10/06/2022
Accession:

Exam Information

Exam Type: GYN
Examiner:
Referrer:
Sonographer: DR RICHIE
Chief Complaint:
Fax History:
Comments:

Registration:
PACS:
MRN: 200000022
Referring MD:

Referring MD:
Referring MD:
Referring MD:

Measurements

2D Mode

Item	M1 M5	Value	Unit
Left Side			
Ovary			
LV Ovar	23.92	23.92 (LxR)	mm
LV Ovar	23.92	23.92 (LxR)	mm
LV Ovar	*****	***** (LxR)	mm
LV Ovar		*****	cm3
Right Side			
Ovary			
RV Ovar	25.29	25.29 (LxR)	mm
RV Ovar	24.25	24.25 (LxR)	mm
RV Ovar	*****	***** (LxR)	mm
RV Ovar		*****	cm3
Unilateral Side			
Uterus			
ULR	42.26 *****	42.26 (LxR)	mm
ULR	32.20 *****	32.20 (LxR)	mm
ULR	***** 27.96	27.96 (LxR)	mm
ULR		27.96	cm3
Endo Thicken			
Endometrium Th	2.81	2.81 (LxR)	mm

Conclusion

Summary

Recommendations:

GYN Report

Patient Information

Patient Name: 8808410432
Birth Date: 25-07-1995
Ethnicity:
Comments:

Patient ID: 30042
Gender: Female

Exam Date: 10/06/2022
Accession:

Exam Information

Exam Type: GYN
Examiner:
Referrer:
Sonographer: DR RICHIE
Chief Complaint:
Fax History:
Comments:

Registration:
PACS:
MRN: 200000022
Referring MD:

Referring MD:
Referring MD:
Referring MD:

Measurements

2D Mode

Item	M1 M5	Value	Unit
Left Side			
Ovary			
LV Ovar	23.92	23.92 (LxR)	mm
LV Ovar	23.92	23.92 (LxR)	mm
LV Ovar	*****	***** (LxR)	mm
LV Ovar		*****	cm3
Right Side			
Ovary			
RV Ovar	25.29	25.29 (LxR)	mm
RV Ovar	24.25	24.25 (LxR)	mm
RV Ovar	*****	***** (LxR)	mm
RV Ovar		*****	cm3
Unilateral Side			
Uterus			
ULR	42.26 *****	42.26 (LxR)	mm
ULR	32.20 *****	32.20 (LxR)	mm
ULR	***** 27.96	27.96 (LxR)	mm
ULR		27.96	cm3
Endo Thicken			
Endometrium Th	2.81	2.81 (LxR)	mm