Performing Ultrasound
Abdominal Wall

Anteverted
Anteflexed

Retroverted
Retroflexed

Timing of Studies

Timing

- No suppression or irregular
  - At the end of menses
  - At the end of a withdrawal bleed
- Suppression (LARC, OBCP, Depo-P)
  - Menopausal patients
    - Timing of the study is not critical

Normal Ultrasound

Timing of Studies
Timing of Studies

G, P
LMP
BC
Surgery

15-18 mm
Leiomyosarcoma

- **Prevalence**
  - 1 in 360 to 1 in 7400

- **Mortality**
  - 0.085% Open hysterectomy
  - 0.077% Laparoscopic hysterectomy
  - 17 more women would die from open surgery annually


Color flow Doppler

- Typically flows around a leiomyoma
- Allows visualization of the anatomic location of flow
- Assists in identifying the primary vessel feeding the myoma
- Leiomyosarcoma may have bazaar flow pattern

Adnexal Masses

Infertility - Mass

32-year-old G0 presents for baseline ultrasound for ovulation induction.
26 y.o. G0P0

- Primary dysmenorrhea
- Dyspareunia
- Dyschezia
- Anteverted uterus – fixed
- Fixed adnexa

Vascularity Score: 2

Sliding Organ Sign
Uterine Sliding Sign

Negative (no sliding)

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<td>Hudelist et al.</td>
<td>117</td>
<td>85</td>
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Multiplaner Reconstruction
35 y.o. G4P0040

- Right ovarian cystic mass
- Medical conditions
  - HIV
  - H/O stroke (cocaine)
  - Asthma
  - Hypothyroidism
  - Hearing loss
  - CA125 = 20.4
28 y.o. G3P2012

- c/o cramping pain, worse with her menses
- BC: IUD x 1 year
- hCG: negative
- Exam
  - Uterus: Anteverted, normal size, with mild tenderness
  - IUD strings not visible
  - Adnexa: “right adnexal mass”
Thank You