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- DOLOR PÉLVICO

- AGUDO

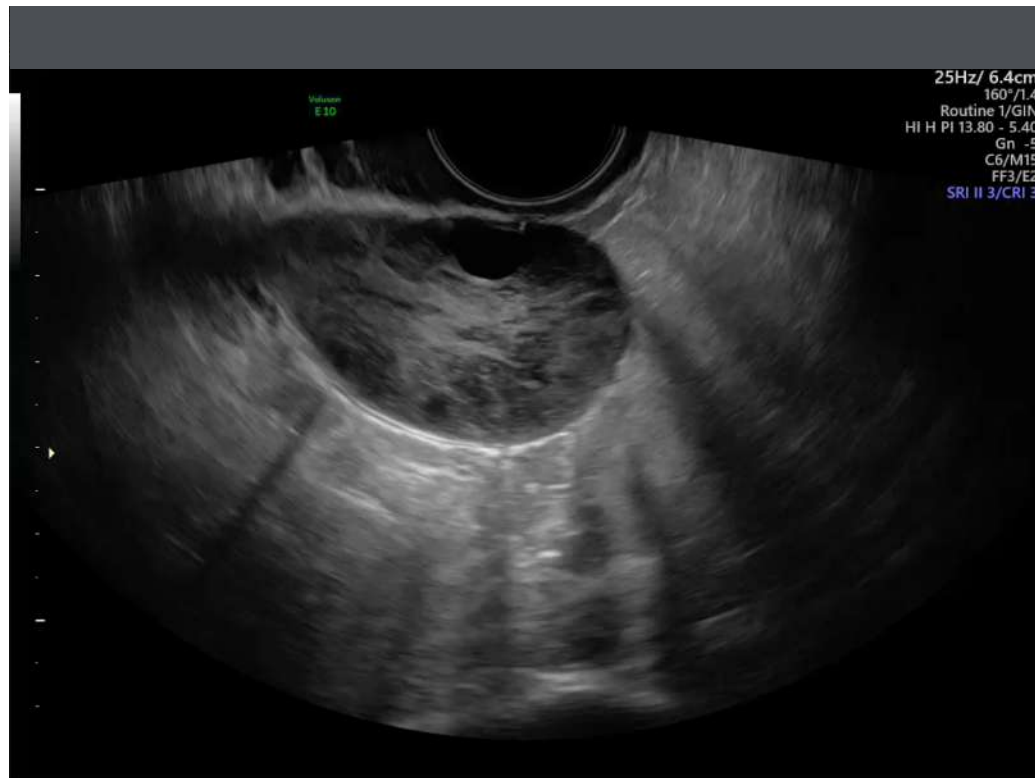
- TORSIÓN ANEXIAL
- ENFERMEDAD INFLAMATORIA PÉLVICA AGUDA
- QUISTE HEMORRÁGICO
- NECROSIS MIOMA

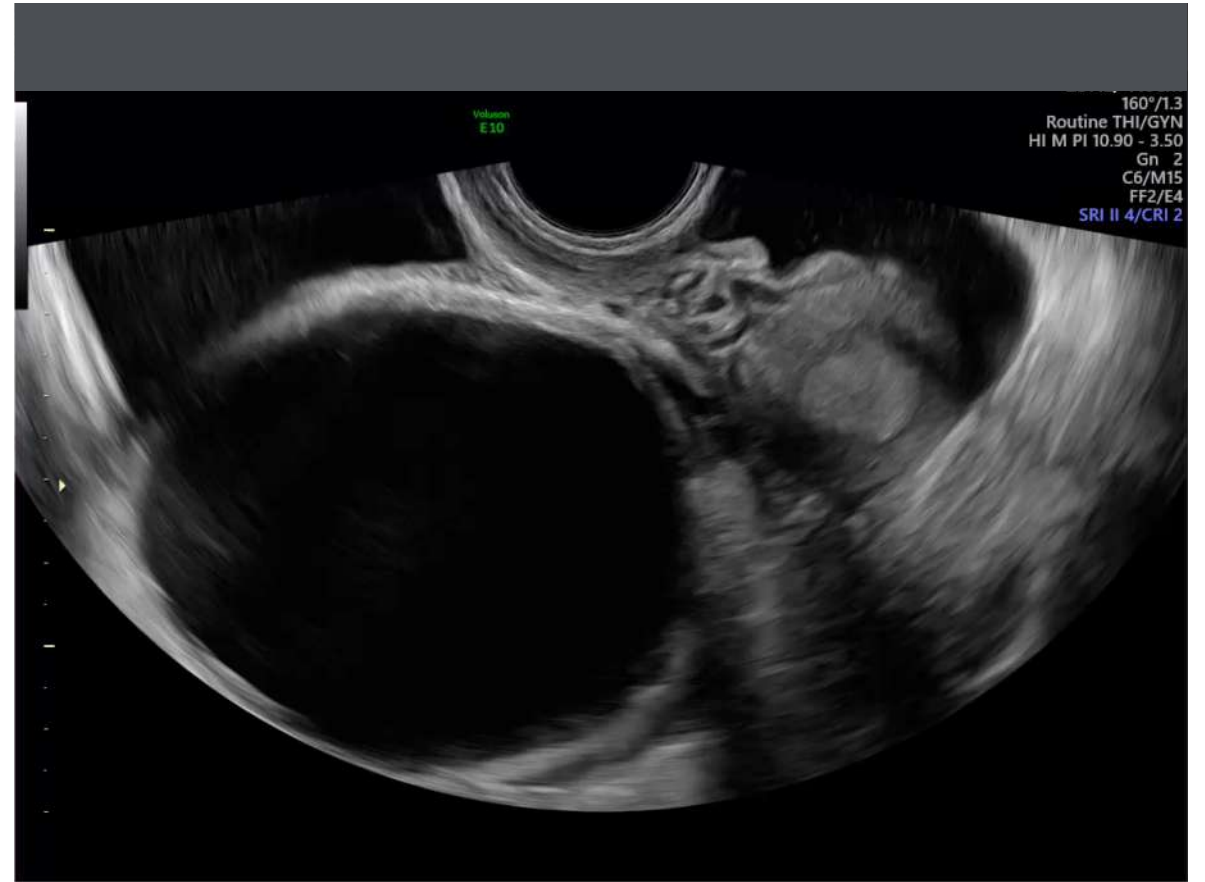
- CRÓNICO

- ENFERMEDAD INFLAMATORIA PÉLVICA CRÓNICA
- CONGESTION PELVICA
- ADENOMIOSIS / ENDOMETRIOSIS PÉLVICA
- MALPOSICIONAMIENTO DIU / DISPOSITIVOS DE OBSTRUCCIÓN TUBÁRICA
- PATOLOGÍA OBSTRUCTIVA TGI
- ADHERENCIAS

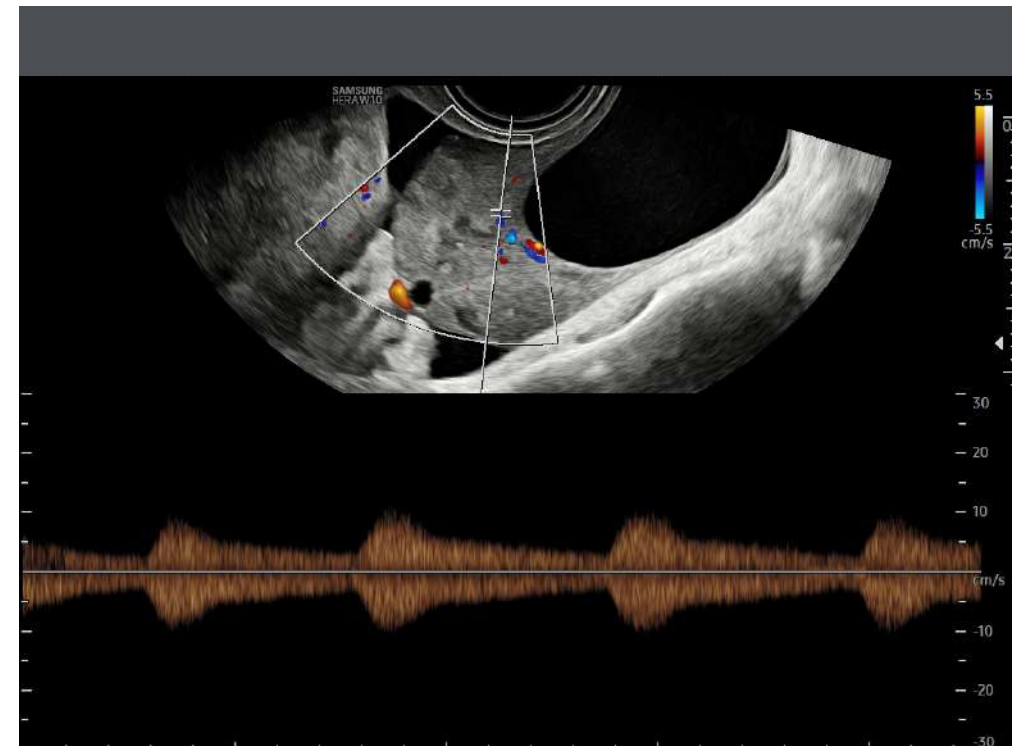
- CAUSAS NO GINECOLÓGICAS

# TORSIÓN ANEXIAL














## Diagnostic accuracy of ultrasound signs for detecting adnexal torsion: systematic review and meta-analysis

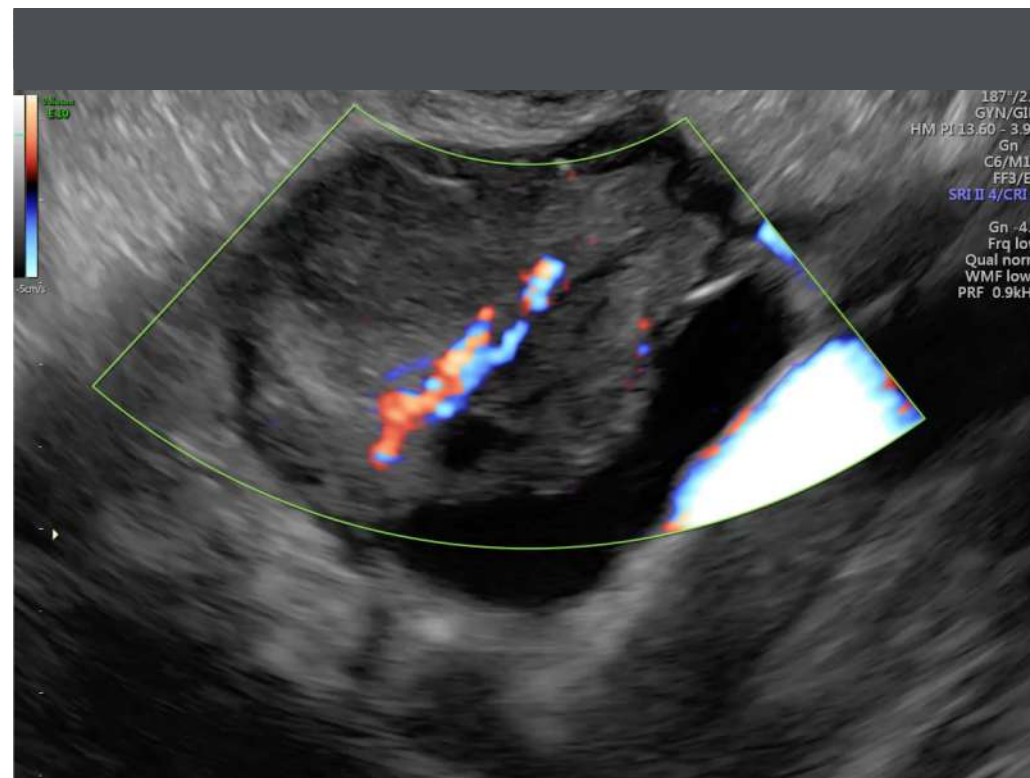
I. GARDE<sup>1</sup>, C. PAREDES<sup>2</sup>, L. VENTURA<sup>3</sup>, M. A. PASCUAL<sup>4</sup> , S. AJOSSA<sup>5</sup>, S. GUERRIERO<sup>5</sup> , J. VARA<sup>6</sup>, M. LINARES<sup>7</sup> and J. L. ALCÁZAR<sup>6</sup> 

**Table 4** Diagnostic performance of ultrasound signs for adnexal torsion

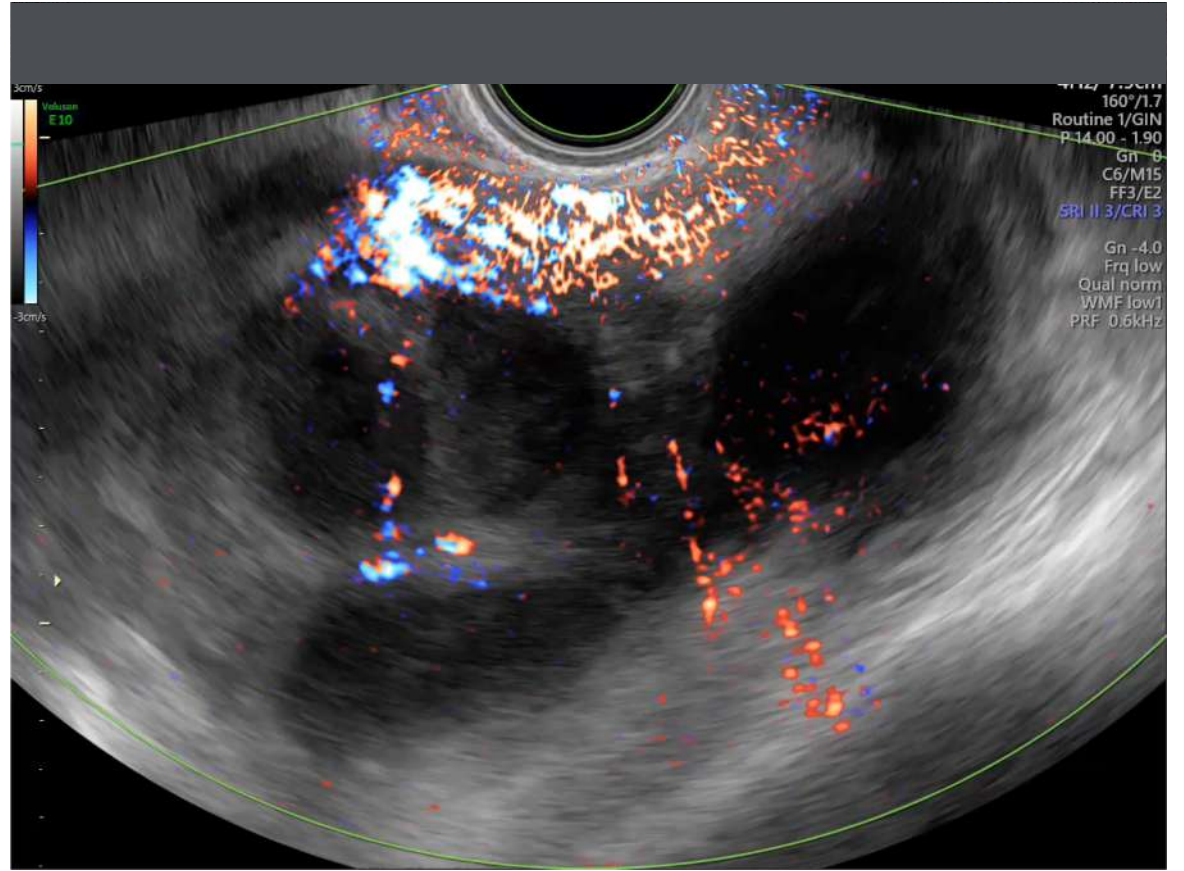
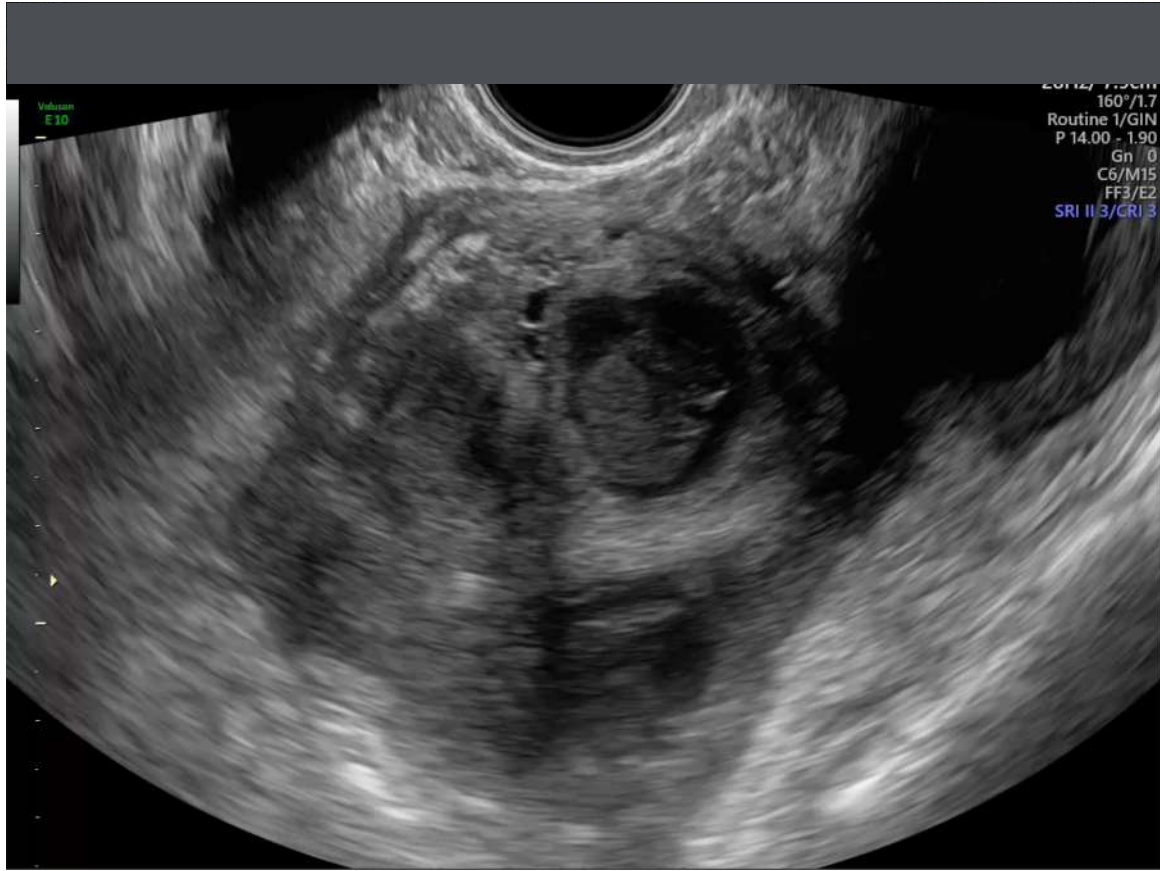
<i>Ultrasound sign</i>	<i>Sensitivity (95% CI) (%)</i>	<i>Specificity (95% CI) (%)</i>	<i>AUC (95% CI)</i>	<i>DOR (95% CI)</i>
Ovarian edema	58 (38–76)	86 (61–96)	0.77 (0.66–0.85)	8 (2–36)
Adnexal mass	69 (55–81)	46 (22–71)	0.65 (0.52–0.75)	2 (1–5)
Whirlpool sign	65 (12–96)	91 (81–96)	0.92 (0.81–0.97)	20 (2–164)
Ovarian Doppler flow	53 (34–72)	95 (86–98)	0.86 (0.76–0.92)	22 (7–76)
Pelvic fluid	55 (38–71)	69 (54–80)	0.67 (0.54–0.77)	3 (1–6)

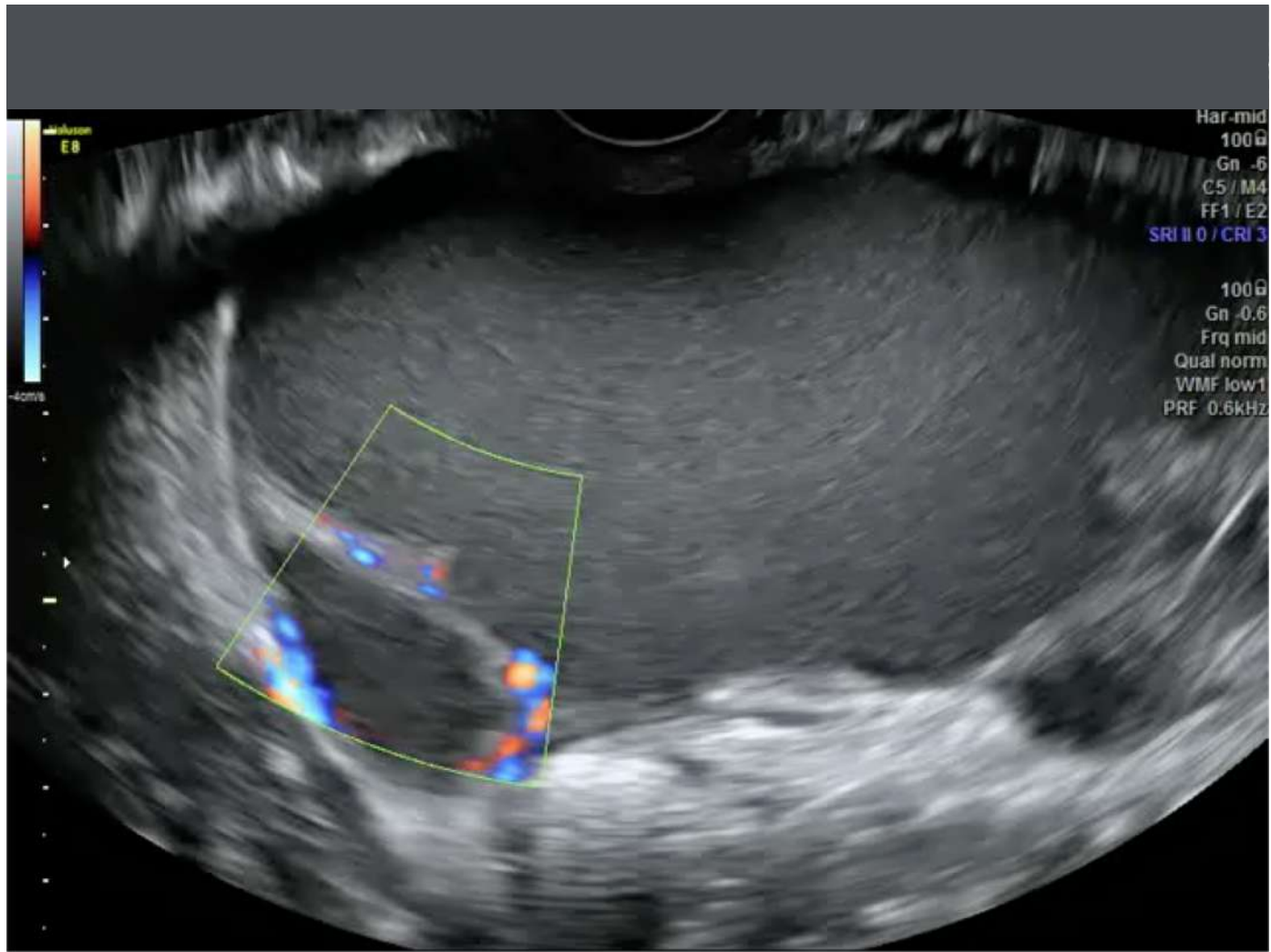
AUC, area under the receiver-operating-characteristics curve; DOR, diagnostic odds ratio.

# ENFERMEDAD INFLAMATORIA PELVICA AGUDA









# ENFERMEDAD INFLAMATORIA PELVICA CRÓNICA





### The sensitivity and specificity of transvaginal ultrasound with regard to acute pelvic inflammatory disease: a review of the literature

G. Romosan · L. Valentin

**Table 2** Ultrasound features associated with acute pelvic inflammatory disease/salpingitis and their sensitivity and specificity

Reference	Golden standard	Thick tubal wall		Cogwheel sign		Fluid in pouch of Douglas		Polycystic-like ovaries		Bilateral adnexal mass		Incomplete septa		TOC		TOA	
		Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)	Sens (%)	Spec (%)
Patten et al. [7]	Lap	33 (10/30) <sup>ab</sup>	100 (4/4) <sup>ab</sup>	NA	NA	50 (8/16)	50 (1/2)	NA	NA	NA	NA	NA	NA	NA	NA	30 (9/30) <sup>a</sup>	100 (4/4) <sup>a</sup>
Tukeva et al. [9]	Lap	NA	NA	NA	NA	NA	NA	7 <sup>c,d</sup>	7 <sup>c,d</sup>	NA	NA	NA	NA	NA	NA	29 (6/21)	78 (7/9)
Molander et al. [6]	Lap <sup>e</sup>	70 <sup>f</sup> (14/20)	90 <sup>f</sup> (18/20)	55 (11/20)	95 (19/20)	60 (12/20)	85 (17/20)	NA	NA	NA	NA	60 (12/20)	15 (3/20)	NA	NA	25 (5/20)	100 (20/20)
Romosan et al. [5]	Lap	29 (10/34) <sup>ab</sup>	NA	0 (0/34) <sup>g</sup>	99 (69/70) <sup>a</sup>	82 (14/17)	43 (15/35)	18 (6/34) <sup>ac</sup>	80 (56/70) <sup>ac</sup>	82 (14/17)	83 (29/35)	NA	NA	NA	NA	NA	NA
Cacciatore et al. [8]	End biopsy	85 <sup>b</sup> (11/13)	100 <sup>b</sup> (38/38)	NA	NA	77 (10/13)	79 (30/38)	100 (13/13) <sup>c</sup>	71 (27/38) <sup>c</sup>	NA	NA	NA	NA	15 (2/13)	100 (38/38)	NA	NA
Boardman et al. [11]	Lap./End. biopsy <sup>g</sup>	NA	NA	NA	NA	37 (7/19)	58 (21/36)	42 (8/19) <sup>h</sup>	86 (31/36) <sup>h</sup>	NA	NA	NA	NA	NA	NA	NA	NA
Timor-Tritsch et al. [4]	Clinical/surgical <sup>i</sup>	100 (14/14) <sup>j</sup>	97 (58/60) <sup>j</sup>	86 (12/14)	97 (58/60)	50 (7/14)	90 (50/60)	NA	NA	NA	NA	86 (12/14)	7 (4/60)	36 (5/14)	98 (59/60)	NA	NA

Review

## Transvaginal Ultrasound Accuracy in the Hydrosalpinx Diagnosis: A Systematic Review and Meta-Analysis

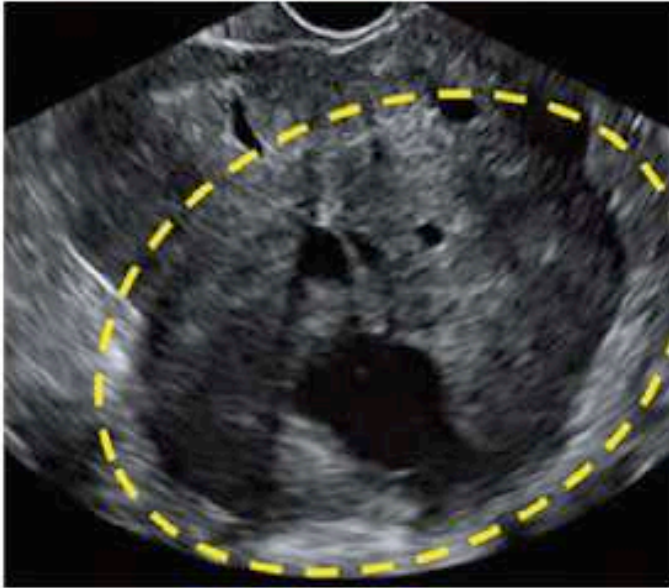
Aina Delgado-Morell <sup>1,2</sup>, Mar Nieto-Tous <sup>3</sup>, Cristina Andrada-Ripollés <sup>4</sup>, Maria Ángela Pascual <sup>5</sup>,  
Silvia Ajossa <sup>6,7</sup>, Stefano Guerriero <sup>6,7</sup> and Juan Luis Alcázar <sup>8,\*</sup>

Sensibilidad 84% (IC 95%: 76%-89%)  
Especificidad 99% (IC 95%: 98%-100%)

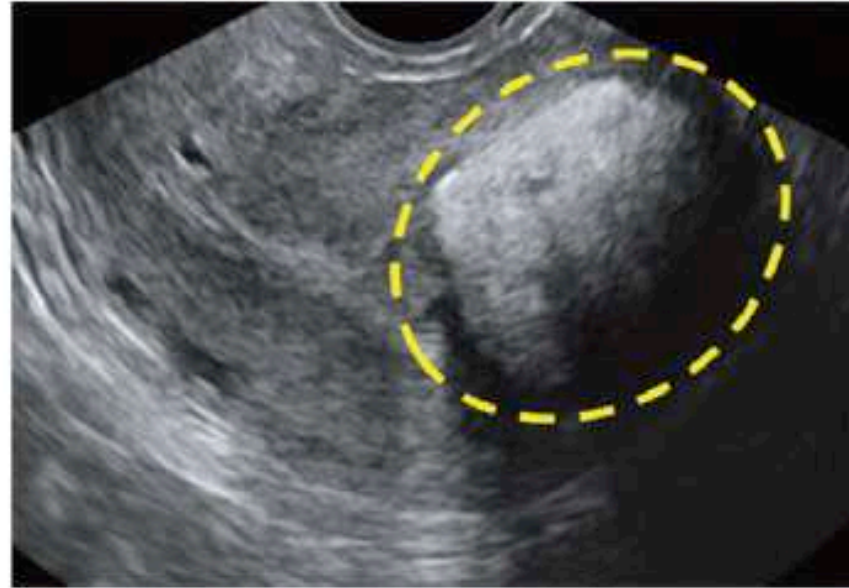
**Table 2.** QUADAS-2 assessment of the studies included in the meta-analysis.

Study	Risk of Bias			
	Patient Selection	Index Test	Reference Standard	Flow and Timing
Alcázar	Low risk	Low risk	High risk	Low risk
Bhatty	Unclear	Unclear	Unclear	Unclear
Guerriero	Low risk	Low risk	Unclear	Low risk
Sayasneh	Low risk	Low risk	Unclear	Low risk
Sokalska	Unclear	Low risk	Unclear	Low risk
Yazbek	High risk	Low risk	Unclear	Unclear

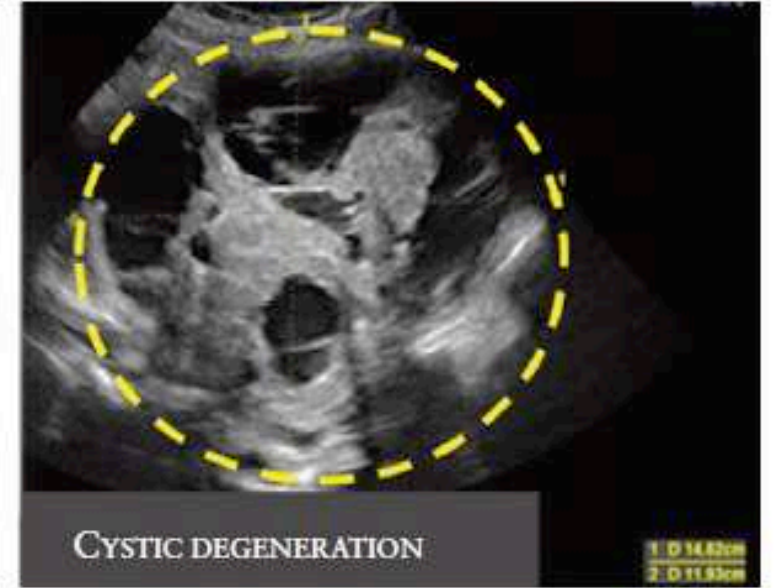
## NECROSIS MIOMA



Hialina



Grasa



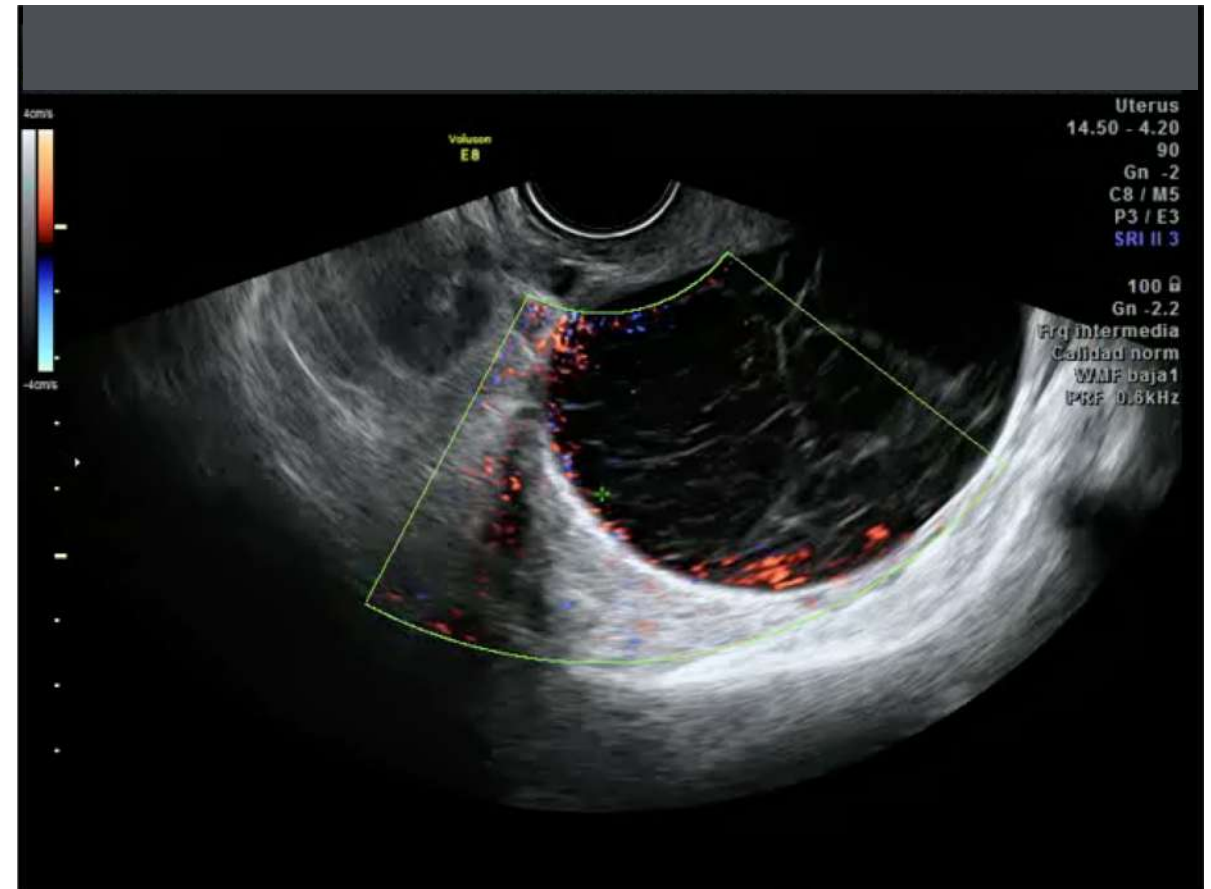
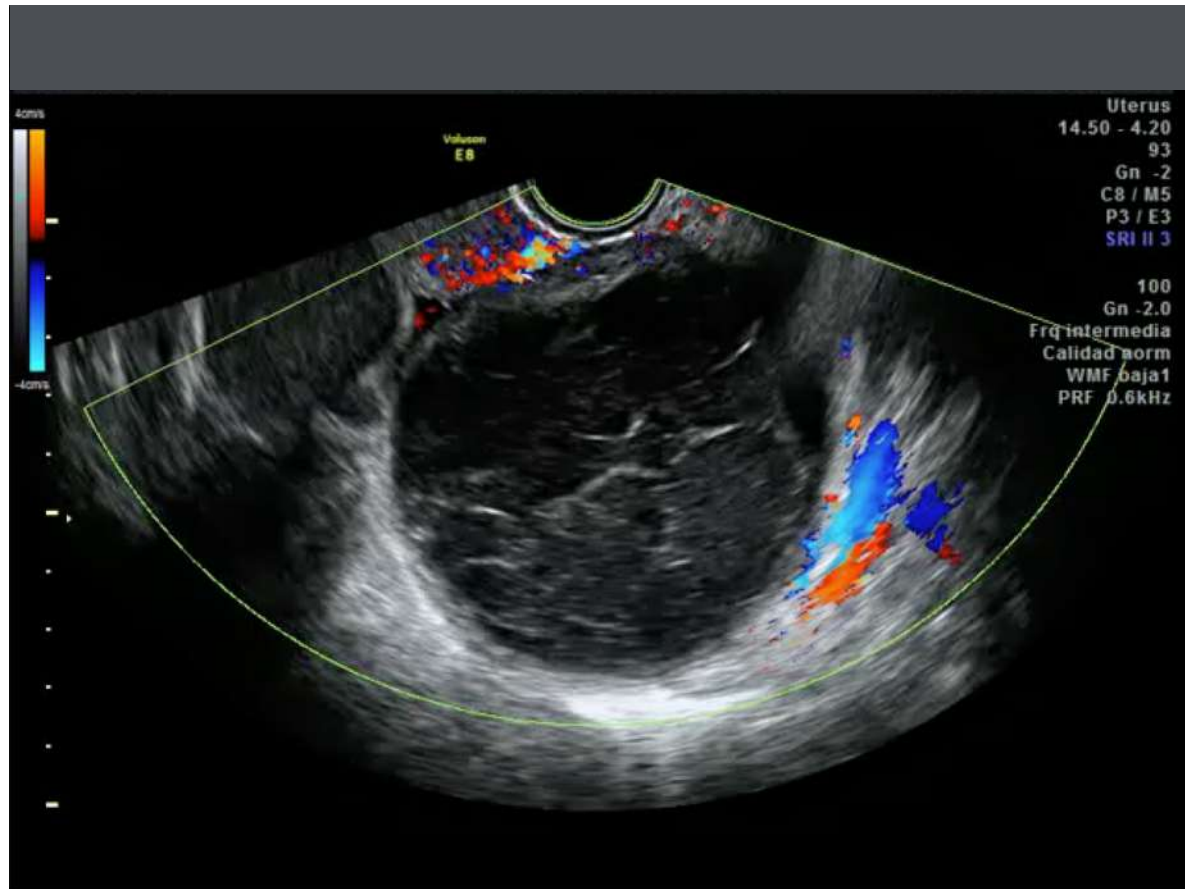
Quística

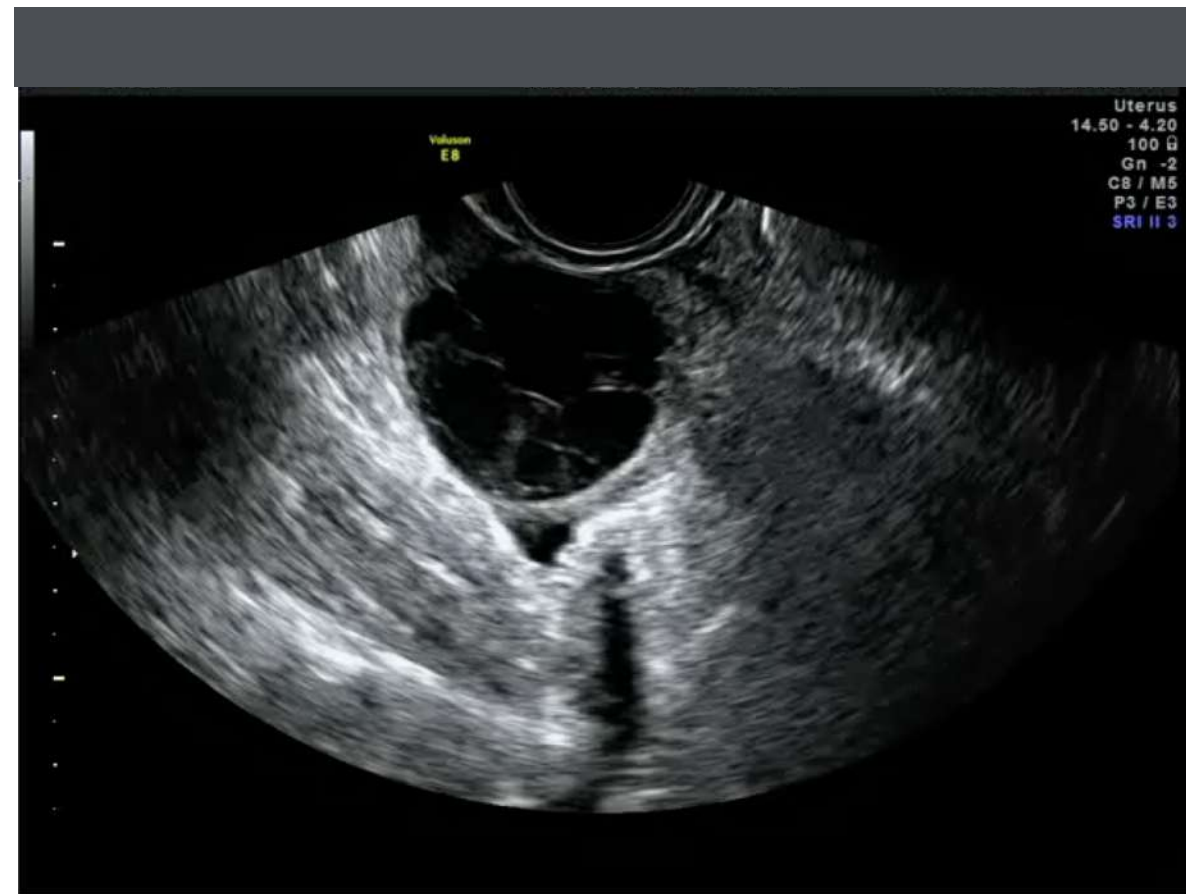


Mixoide



# QUISTE HEMORRÁGICO







# MALPOSICIONAMIENTO DIU / DISPOSITIVOS OBSTRUCCIÓN TUBÁRICA



A



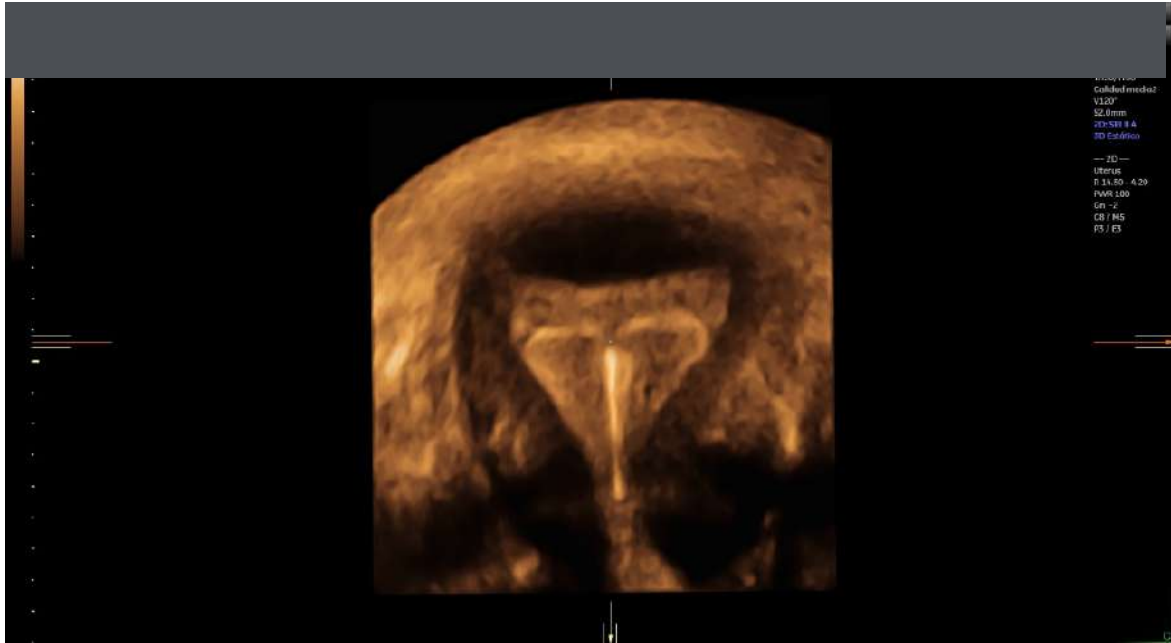
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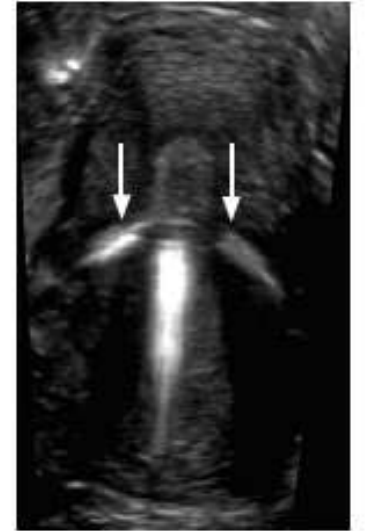


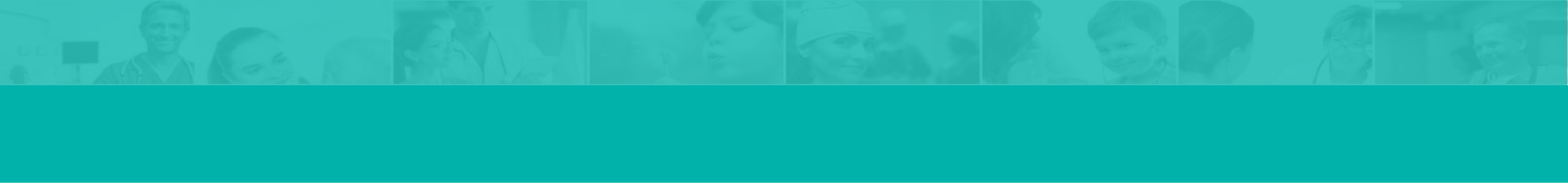
C



D



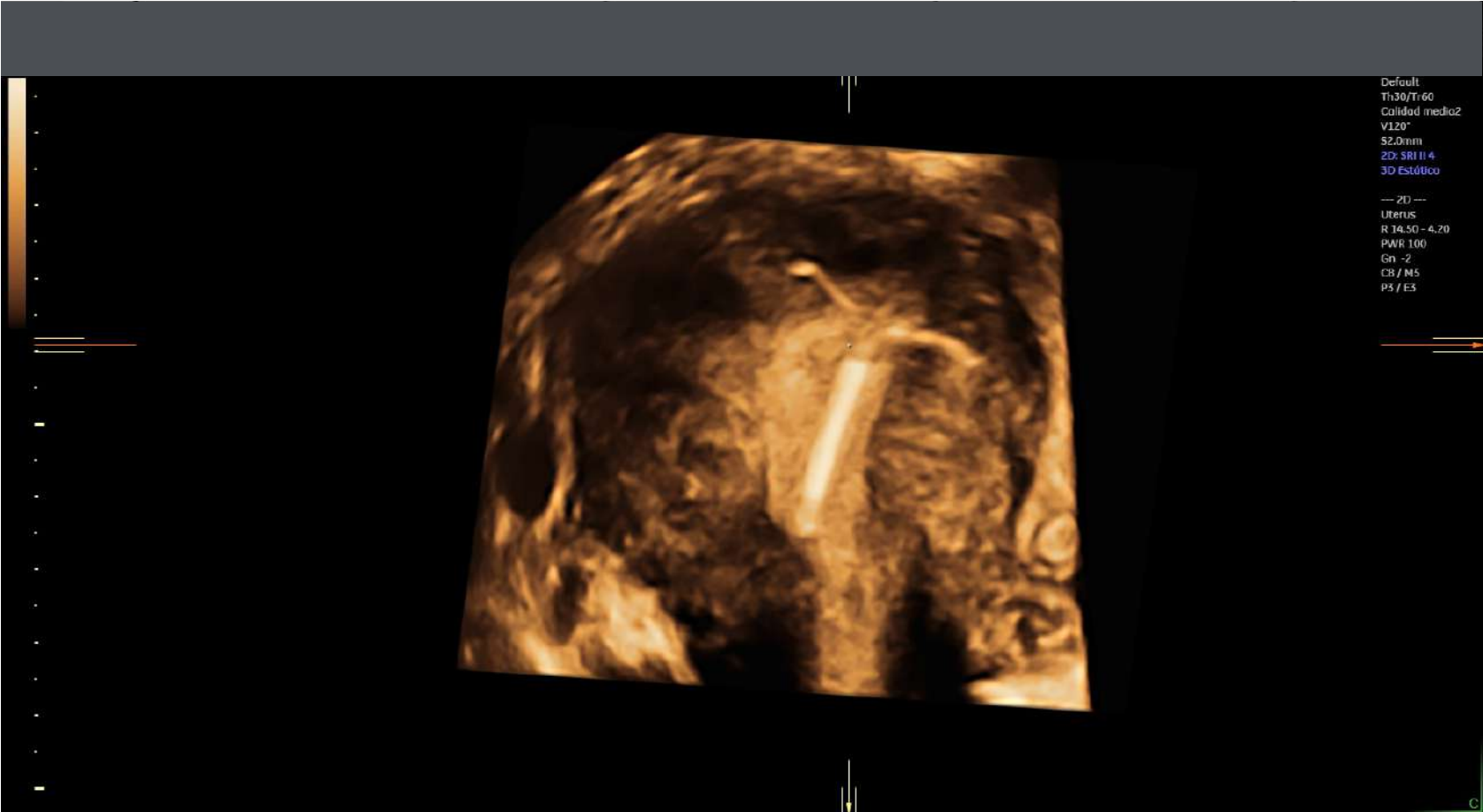




A

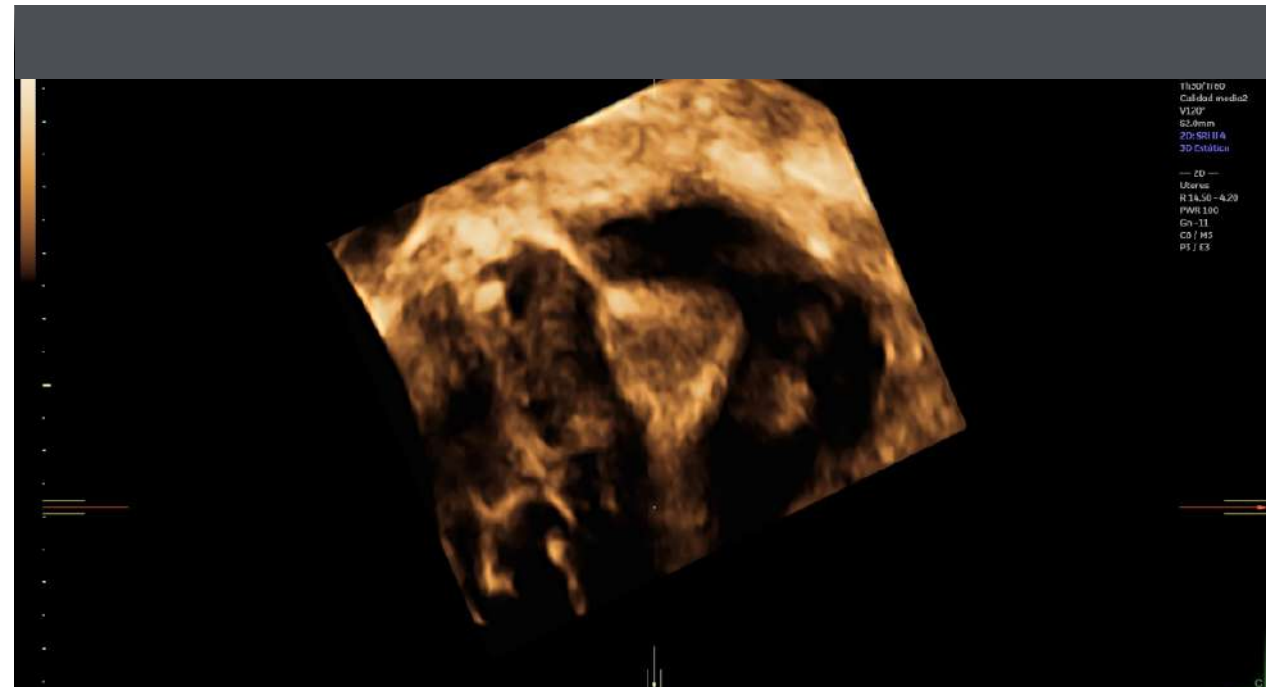
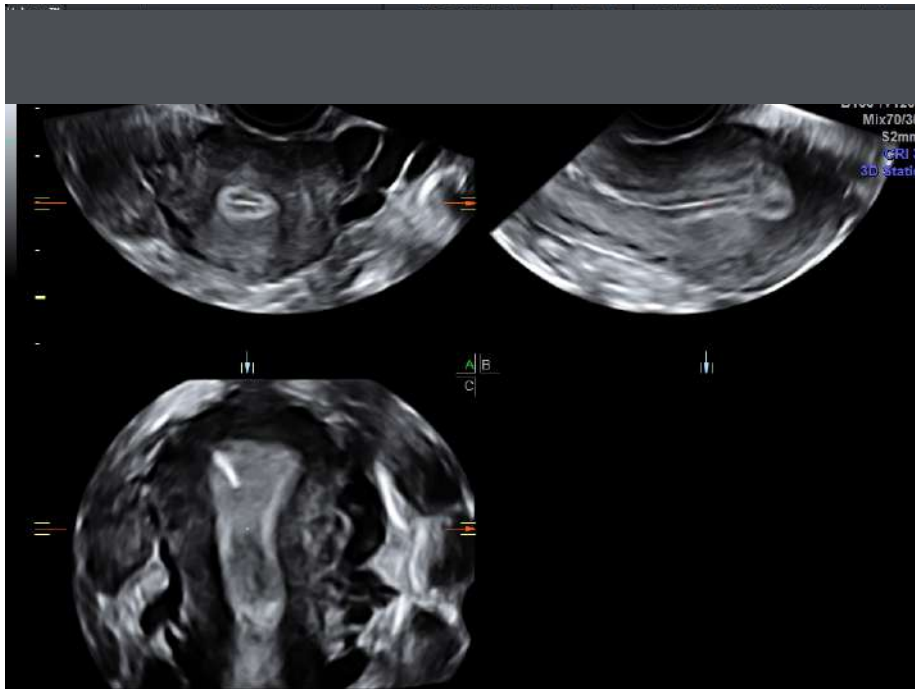


B

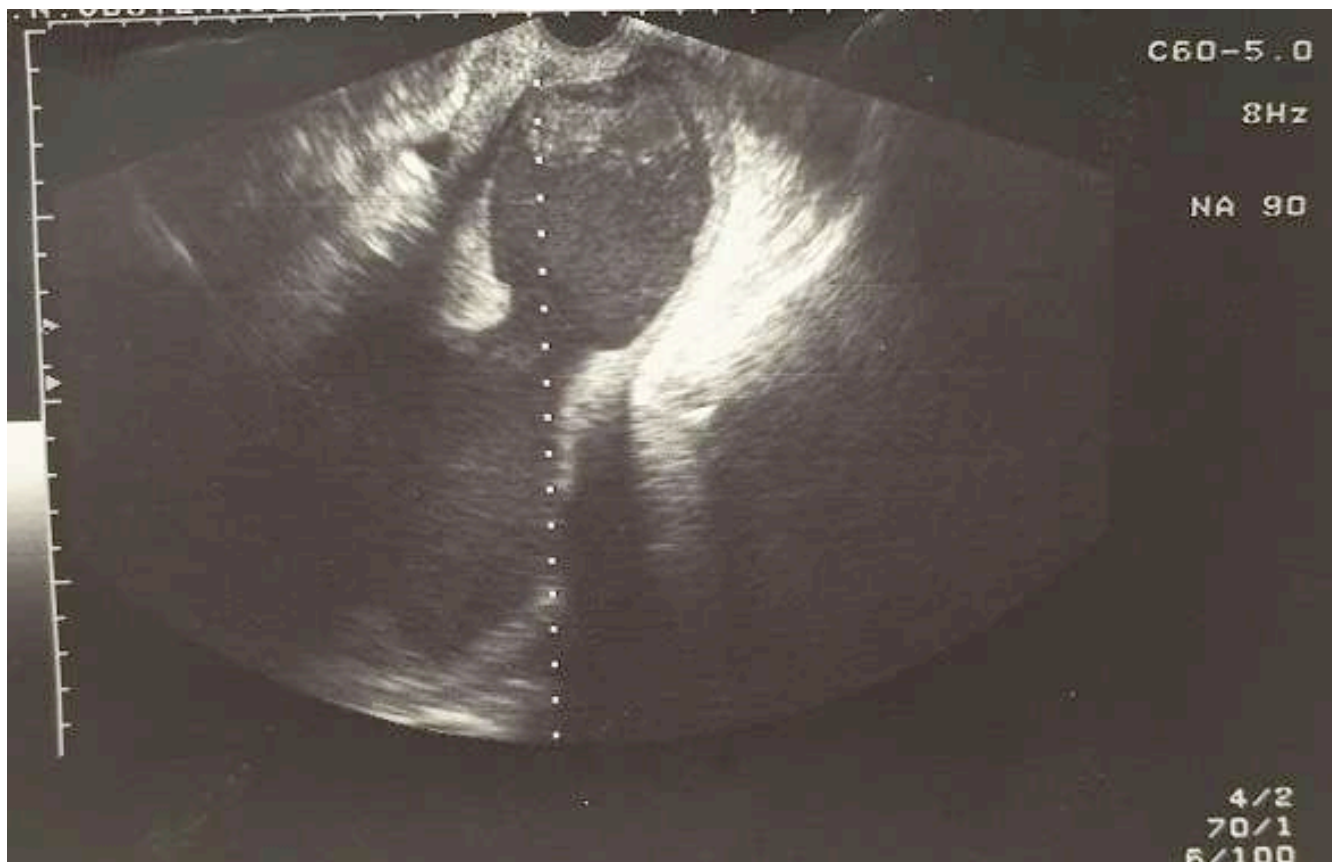


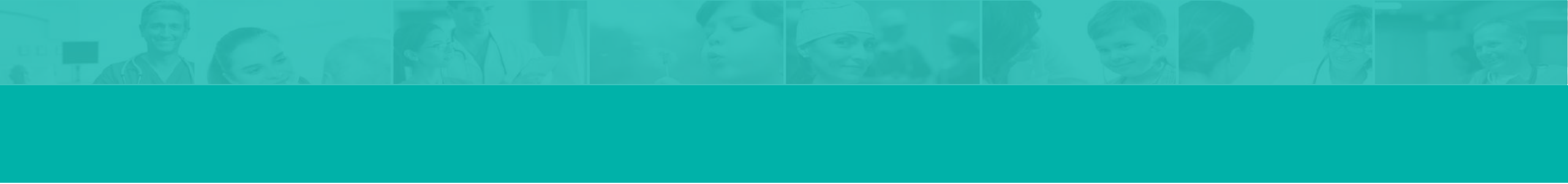


## Valoración de dispositivos de obstrucción tubárica



## Himen imperforado / Tabique vaginal transverso



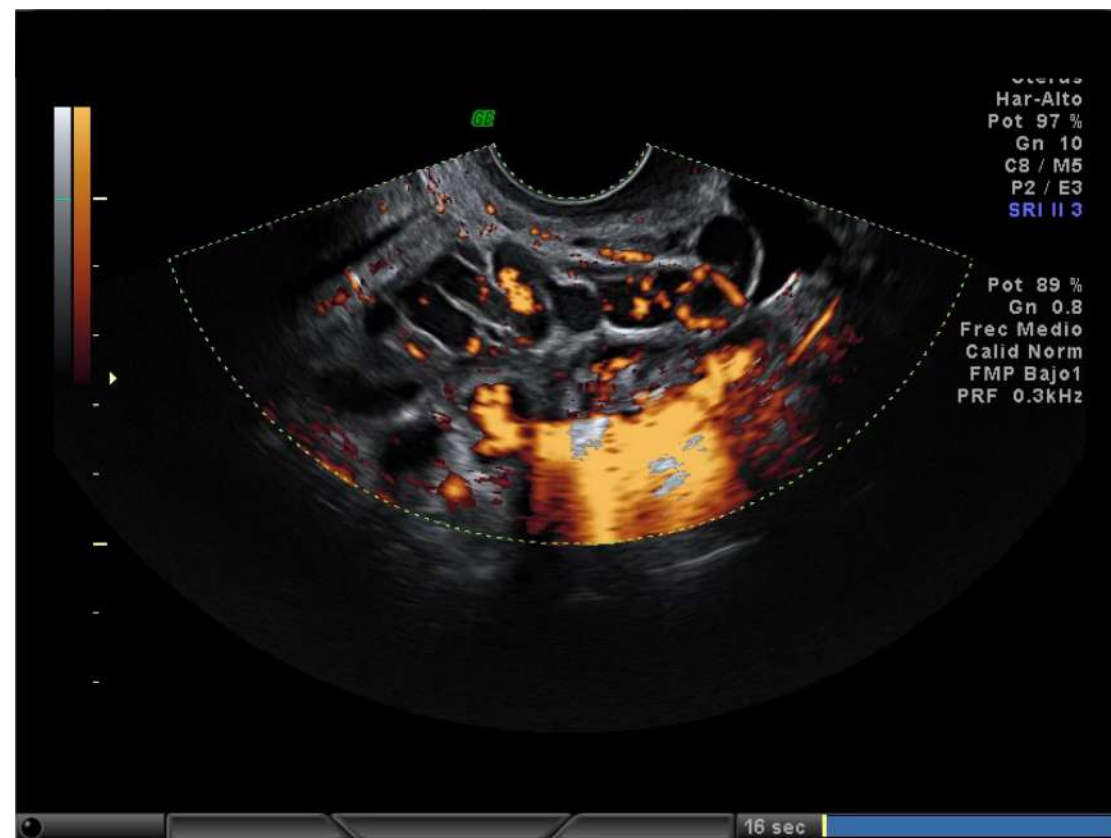


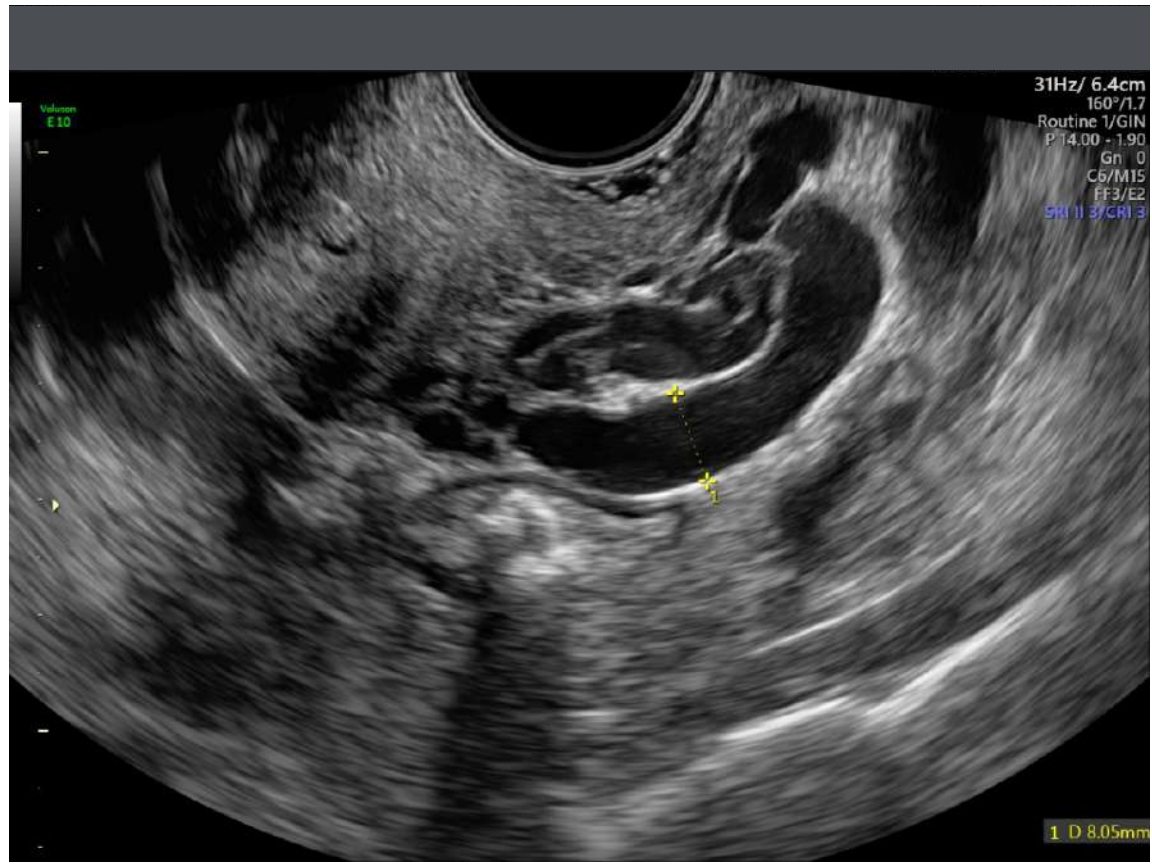
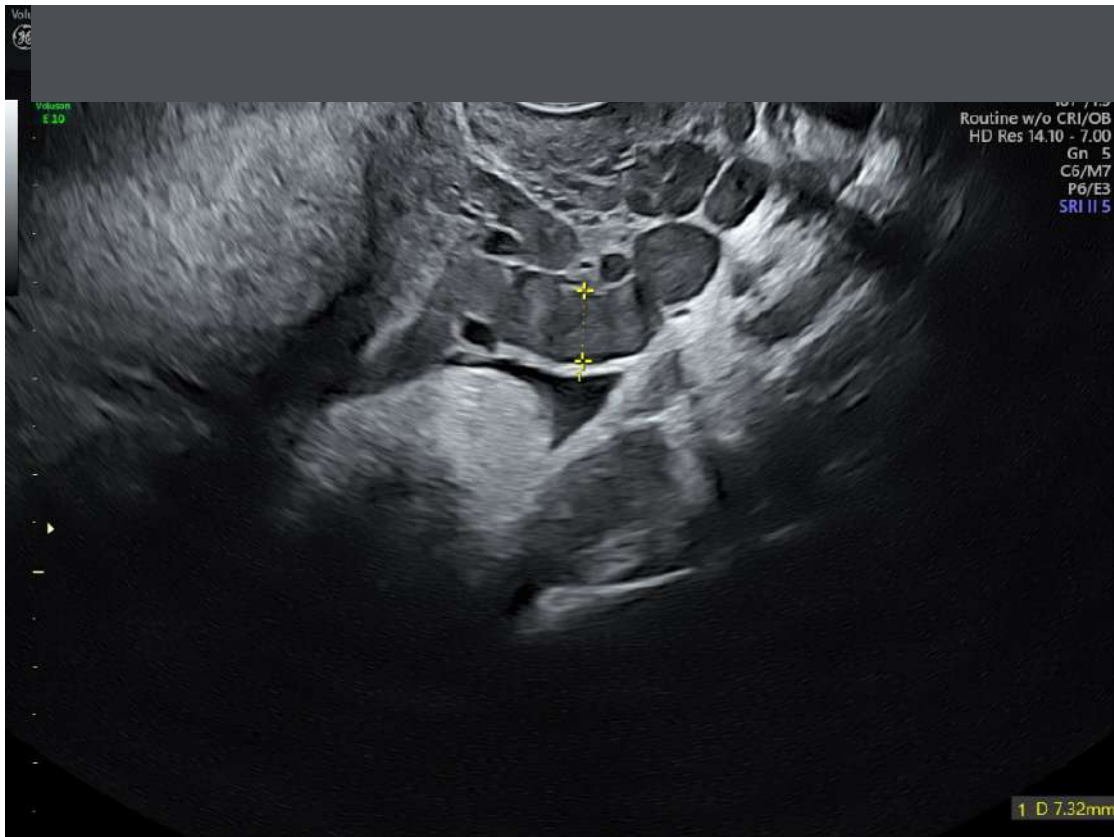
## Cuerno rudimentario



Cortesía Dra. Graupera. Institut Dexeus. BCN

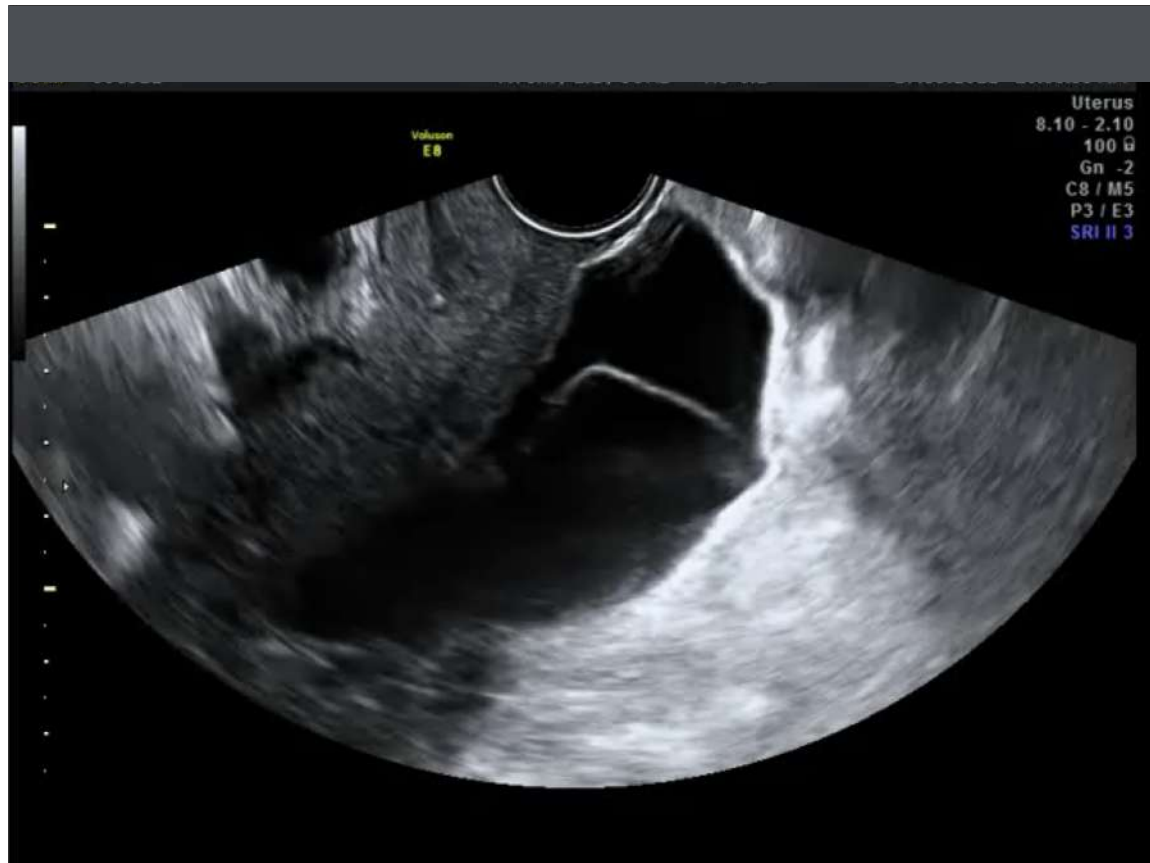
# CONGESTIÓN PÉLVICA

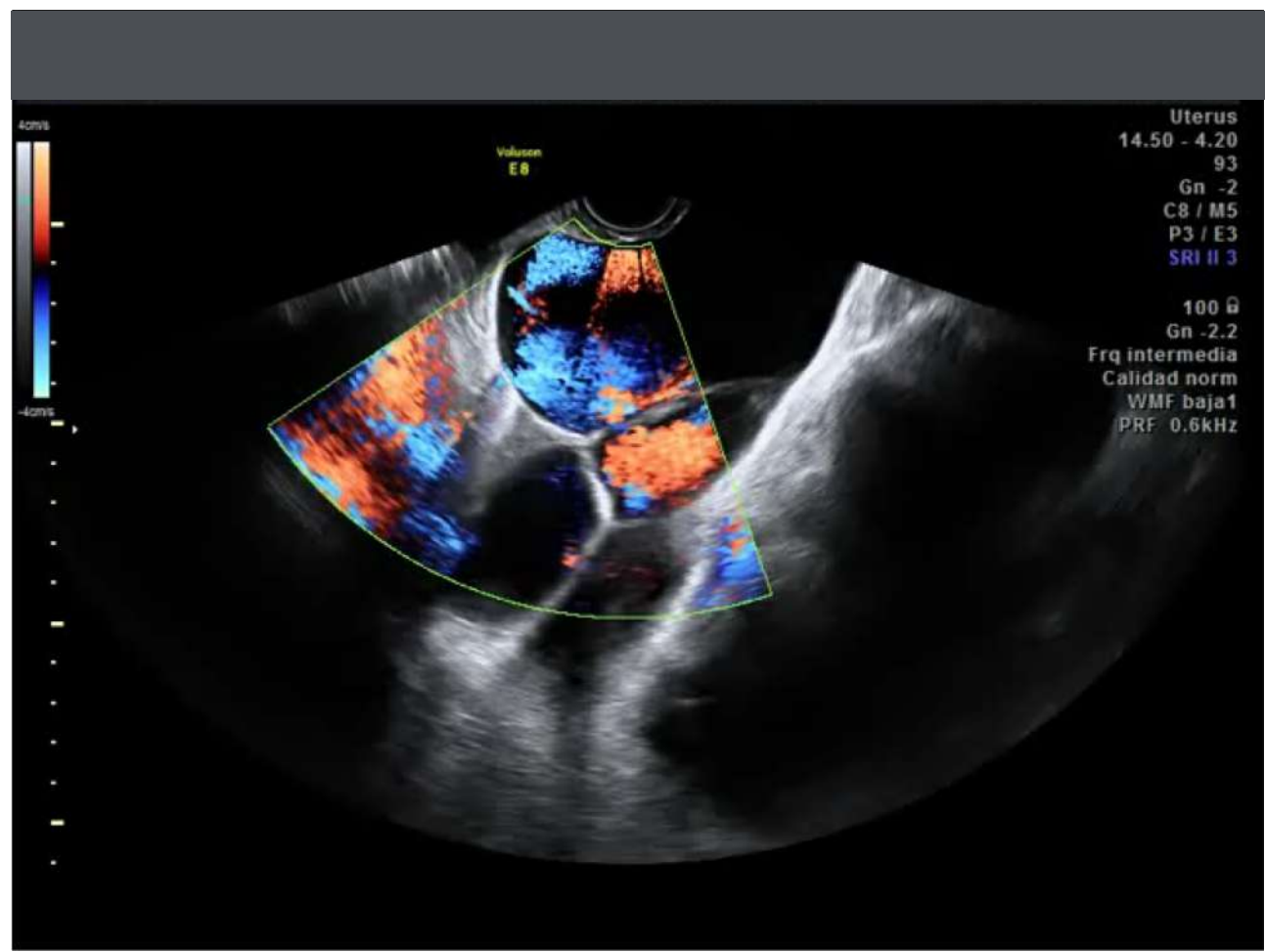






# ADHERENCIAS PÉLVICAS









# CAUSAS NO GINECOLÓGICAS

