Objective
To illustrate the technical simplicity and diagnostic value of including the bladder and the ureters during a standard transvaginal ultrasound examination.

Methods
Illustrative case series

Results
Once a bladder is minimally filled, the anechoic content is visible on ultrasound scan. To differentiate between a unilocular anechoic adnexal cyst and the bladder, we identify the urethra and the ureters. The evaluation of bladder wall incidentally shows a deep endometriosis nodule or a transitional cell carcinoma, while ureters are scanned for the presence of lithiasis and hydroureronephrosis. Moreover, site specific tenderness during transvaginal scan over the trigonum, the urethra or a bladder wall nodule is suggestive for cystitis, urethritis or bladder wall endometriosis respectively.

Conclusion
The bladder and pelvic part of the ureters are easily identifiable on transvaginal scan. Important pathology of the lower urinary tract and the distal ureters can be readily diagnosed by transvaginal ultrasound examination. The evaluation of the bladder and the ureters should therefore be part of the standard gynecological ultrasound investigation.