

First Trimester Screening Report

NISHA MAHENDRA GUPTA

Date of birth : 03 March 1995, Examination date: 14 June 2022

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MULIK HOSPITAL

Referring doctor: DR. INDRAJEET MULIK
Address: DHANTOLI, NAGPUR.
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Telephone: 0712-2424478

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).
Parity: 1; Spontaneous deliveries between 16-30 weeks: 0; 31-36 weeks: 0; Deliveries at or after 37 weeks: 1.

Maternal weight: 51.0 kg; Height: 156.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Preeclampsia in previous pregnancy: no; Previous small baby: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 23 March 2022

EDD by dates: 28 December 2022

First Trimester Ultrasound:

Visualisation: good.

Gestational age:

12 weeks + 1 days from CRL

EDD by scan: 26 December 2022

Findings

	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	165 bpm
Crown-rump length (CRL)	56.1 mm
Nuchal translucency (NT)	0.9 mm
Biparietal diameter (BPD)	19.7 mm
Ductus Venosus PI	0.950
Placenta	anterior low
Amniotic fluid	normal
Cord	3 vessels

DOB 03/03/1995
LMP 23/03/2022
Height 156.0 CM
Weight 51.0 kg

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.
Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Abdominal wall: appears normal;
Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:

0.82

equivalent to 0.480 MoM

Endocervical length:

35.0 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: kunda shahane, FMF Id: 101883

Condition

Trisomy 21

Background risk

1: 832

Adjusted risk

1: 16642

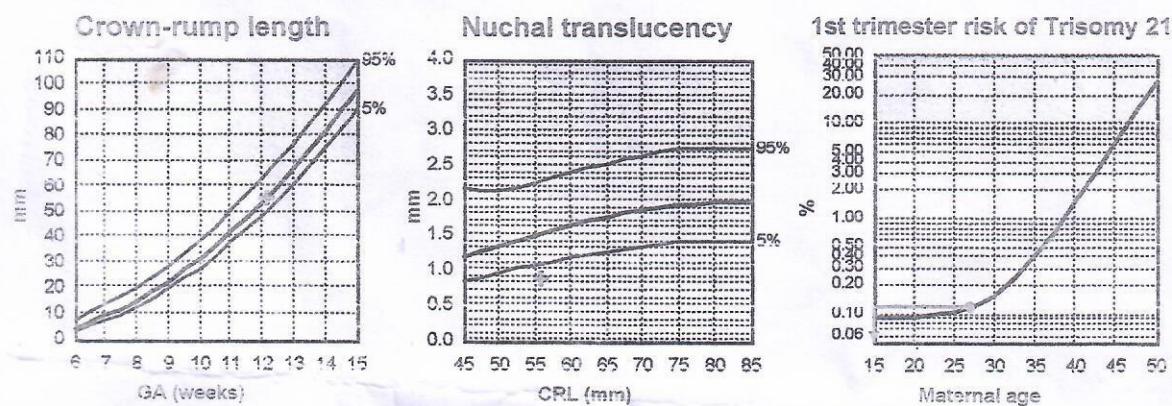
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Trisomy 18	1: 1955	1: 11532
Trisomy 13	1: 6154	<1: 20000
Spontaneous delivery before 34 weeks		1: 513

The background risk for aneuploidies is based on maternal age (27 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate).

All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).



Comments

SINGLE LIVE INTRAUTERINE FETUS WITH VARIABLE PRESENTATION
MATURITY AROUND 12 WEEKS 4 DAYS

PLACENTA DEVELOPING ANTERIOR, LOW LYING, GRADE 1 MATURITY
AMNIOTIC FLUID APPEARS NORMAL

UTERINE ARTERY DOPPLER STUDY NORMAL

INTERNAL OS CLOSED, LENGTH 35 MM

NUCHAL TRANSLUCENCY MEASURES 0.9 MM, NORMAL

NASAL BONE APPEARS NORMAL

NO OTHER SOFT MARKER SEEN AS PER THE GESTATIONAL AGE IS CONCERNED

REVIEW AT 19/20 WEEKS FOR TARGETED SCAN WITH FETAL ECHO

*Concious baby & apneic
due to heart disease*

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