

DR. WARKHEDE SONOGRAPHY DIAGNOSTIC CLINIC

(SONOGRAPHY, COLOUR DOPPLER, 4D SCANS)

Dr. Ashish Warkhede

M.B.B.S., D.M.R.E.

(Consultant Sonologist & Radiologist)

Reg. No. : 2005/01/0322



Ex. Registrar

Seth G. S. Medical College & KEM Hospital, Mumbai

BYL Nair Medical College, Mumbai

Dr. R. N. Cooper Mun. Gen. Hospital, Mumbai

Email : ashish.warkhede55@gmail.com

Name : Mrs. Sonu Dipak Sapate

Age/Sex : 28 YEARS/F

**Ref By : Dr. Pratibha Bagade Madam
(BHMS)**

Date : 10.08.2022

OBSTETRIC 4D ANOMALY SCAN/ TARGET SCAN & DOPPLER EVALUATION

A single intrauterine fetus.

Fetal position: Variable.

Fetal Cardiac activity: Present & regular, 160 /min.

Placenta is posterior and right lateral & shows Grade-I maturity. It lies in the upper uterine segment. No retro-placental clot. Inferior end of placenta is away from the internal os.

Amniotic fluid: Adequate.

Cervical length = 38 mm.

Internal-os is closed. No conning of internal os.

Single loop of umbilical cord noted around the fetal neck.

(Please note that all fetal congenital anomalies may not detected by sonographic examination due to technical difficulties related to liquor volume, fetal position & fetal movements.)

Fetal Parameters are:

BPD	5.35 cms	22 weeks	2 days
HC	19.2 cms	21 weeks	3 days
AC	16.9 cms	22 weeks	0 days
FL	3.68 cms	21 weeks	5 days
HL	3.31 cms	21 weeks	1 days

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Fetal nuchal fold thickness is 3.4 mm approx (within normal limits).

LMP	14.03.2022	Fetal Weight by present USG	454 ± 66 gms
GA by LMP	21 weeks & 2 days.	GA by present USG	21 weeks & 6 days.
EDD by LMP	19.12.2022	EDD by present USG	15.12.2022

Sono-morphological details:

Fetal brain:

Both cerebral hemispheres are normal. No focal lesion in brain parenchyma.

Cavum septum pellucidum is appreciated. Interhemispheric fissure noted.

Ventricular system is normal. No hydrocephalous noted.

Cerebellum is normal. Cysterna magna is normal.

Midline structures are not deviated or deformed.

Spine:

No evidence of spina bifida.

No kypho-scoliotic deformity or meningocele/ meningomyelocele.

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Fetal face:

Both orbits are normally placed. No hyper or hypotelorism.

Nasal bone is seen & normal (length- 5.8 mm).

Upper lip is seen & is normal. No evidence of cleft lip or palate.

Fetal thorax:

Both lungs appear normal.

No evidence of appreciable cystic changes seen in lung parenchyma.

Cardiac position & axis is normal. Situs normal.

Interventricular septum is normal.

Cardiac chambers morphology appears normal.

For detailed evaluation fetal echocardiography is suggested.

Fetal abdomen:

Stomach bubble is appreciated & is normal.

Both kidneys are visualised. Mild renal calyctasis noted.

No hydronephrosis or hydroureter/megaureter is noted.

Urinary bladder is distended & normal.

Umbilical cord & cord insertion is normal. Umbilical cord shows three vessels.

No omphalocele.

Fetal skeletal system:

Fetal upper & lower limbs appear normal.

OBSTETRIC COLOUR DOPPLER :

- **Right uterine artery PI – 0.52.**
- **Left uterine artery PI – 0.87.**
- **No diastolic notch is noted in either of the uterine arteries.**
- **Both uterine arteries, fetal middle cerebral artery and umbilical artery show normal wave forms, PI, RI and S/D indices.**
- **Umbilical vein shows normal venous flow.**
- **Ductus venosus show normal waveform.**

(PTO)....

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IMPRESSION :

- A single live intrauterine fetus.
- Average sonographic gestational age is 21 to 22 weeks, corresponding with the period of amenorrhoea.
- Presentation: Variable.
- Amniotic fluid: Adequate.
- No placenta praevia or retro placental clot at the present scan.
- Fetal mild renal calyctasis. No gross fetal congenital anomalies are seen at present scan. (For detailed cardiac evaluation fetal echocardiography is suggested at 23 to 24 weeks. Please note that all fetal congenital anomalies may not be detected by sonographic examination due to technical difficulties related to liquor volume, fetal position & fetal movements.)
- No feto placental or utero placental insufficiency is observed at the present obstetric doppler scan.
- Single loop of umbilical cord noted around the fetal neck.

Suggest :- Quadruple marker test.

(I Dr.Ashish P. Warkhede declare that while conducting ultrasonography on Mrs. Sonu Dipak Sapate , I have neither detected nor disclosed the sex of her fetus to any body in any manner.)

Thanks.

Dr. Ashish Warkhede

Consultant Sonologist & Radiologist

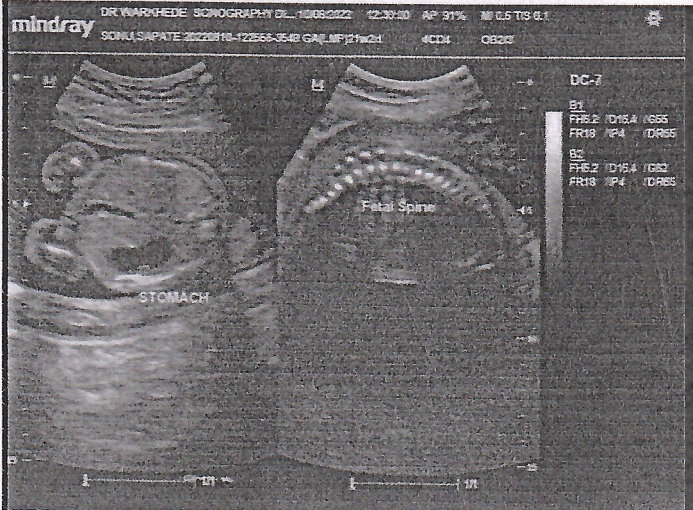
Dr. WARKHEDE SONOGRAPHY DIAGNOSTIC CLINIC, CHANDRAPUR .

10 Aug 2022

Name : Sonu Dipak Sapate 28 / F

Ref.by : DR.PRATIBHA BAGADE (BHMS)

Done by : DR. ASHISH WARKHEDE MBBS,DMRE



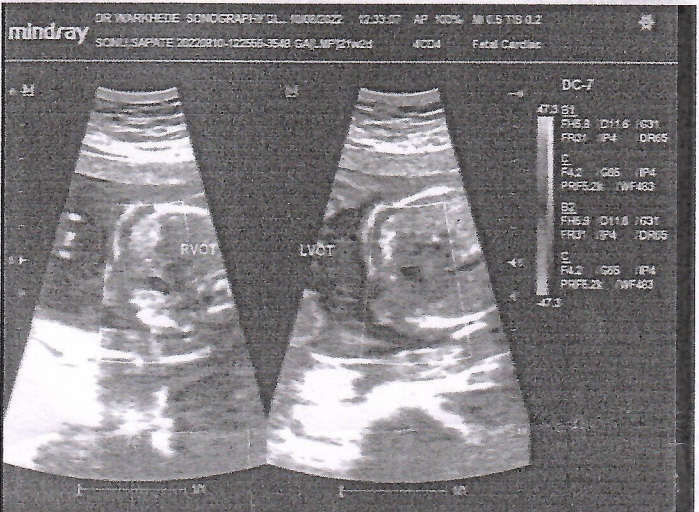
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