Dr. Pooja Shrivastava

MBBS
MS (Obstetrics & Gynaecology)
Reg No. MP-4298

- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai.
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

Obstetrician & Gynaecologist

Trained in : Gynaecological Endoscopy Laparoscopy & Hysteroscopy. Obstetric & Gynaecological Ultrasonography Laparoscopic Sterlization & Family Planning

LH-A-007170

Date : 19-Aug-2022

Name :	**MRS. SWATI SHRIVASTAVA**	**Age/Sex :**	30 Years / Female
Address :	Bhagwan Parisar Misrod	**Mobile No.:**	8962115095

BP 96/62
Pulse 92/min
Temp 97.6°F
SpO2 98%
Wt 43.1 kg

Lotus Hospital

In Emergency Call : 9425005377

Sunday - By prior Appointment only

Email Id : poojadr2003@gmail.com

LOTUS HOSPITAL
M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal
Ph.: 0755-4093322, 2410500, 6262093322

BHOPAL CITY CLINIC
3559, Opp. Govt. PHC, Misrod Main Road, Bhopal
Ph.: 0755-4093322, 6262093322

Signature

PAID

22 AUG 2022

Discharge

26 AUG 2022

BP – 82/52
Pulse – 103
SPO2 – 97%
Temp – 97.6°F
Wt – 43 kg

Inj. [illegible] 250 mg i.m. twice weekly

Inj. Oricar [illegible] i.m. twice weekly

Tab [illegible] plus 2 tabs

Tab [illegible] 10 mg [illegible]

Tab Thyronorm 50 mg OD

Syp [illegible] 4 tsp [illegible]

~~[illegible]~~

Inward

[illegible]

ंकिता विजयवर्गीय
बी. एस., डी. एम. आर डी
र. आई. फैलोशिप :
टी हॉस्पिटल, मुंबई
ा हॉस्पिटल, मुंबई
रेडियोलाजिस्ट :
ोर्टिस हॉस्पिटल, नोएडा
जी. टी . बी. हॉस्पिटल, दिल्ली
रीजेंसी हॉस्पिटल लिमिटेड, कानपुर
जवाहर लाल नेहरू कैंसर हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA
MBBS, DMRD
MRI FELLOWSHIPS :
• NANAVATI HOSPITAL, MUMBAI
• HINDUJA HOSPITAL, MUMBAI
FORMER RADIOLOGIST AT:
• FORTIS HOSPITAL, NOIDA
• G.T.B HOSPITAL, DELHI
• REGENCY HOSPITAL LTD, KANPUR
• JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL
FMF Certified from Fetal Medicine Foundatio
Reg. No. MP-8932

PATIENT'S NAME : MRS. SWATI **AGE/SEX : 30Y/F**

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS) **DATE : 26.08.2022**

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 29.05.2022 **GA(LMP) : 12wk 5d** **EDD : 05.03.2023**

- **Single live fetus seen** in the intrauterine cavity in **variable** presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & **is** 156 beats /min.
- PLACENTA: **is grade I, high posterior & not low lying.**
- LIQUOR: **is adequate** for the period of gestation.

Fetal morphology for gestation appears normal.

- **Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.**
- **Both orbits & lens seen. PMT is intact . No intrathoracic mass seen. No TR .**
- **Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.**
- **Urinary bladder is seen, appears normal. 3 vessel cord is seen.**
- **All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal transluscency measures 1.6 mm (WNL).**
- **Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 0.88)**

FETAL GROWTH PARAMETERS

CRL	58.7	mm	~	12	wks	3	days of gestation.

- Estimated gestational age is **12 weeks 3 days** (+/- 1 week). **EDD by USG :** 07.03.2023
- Internal os closed. Cervical length is WNL (36.2 mm).
- ***Baseline screening of both uterine arteries was done with mean PI ~ 1.58 (WNL for gestation)***

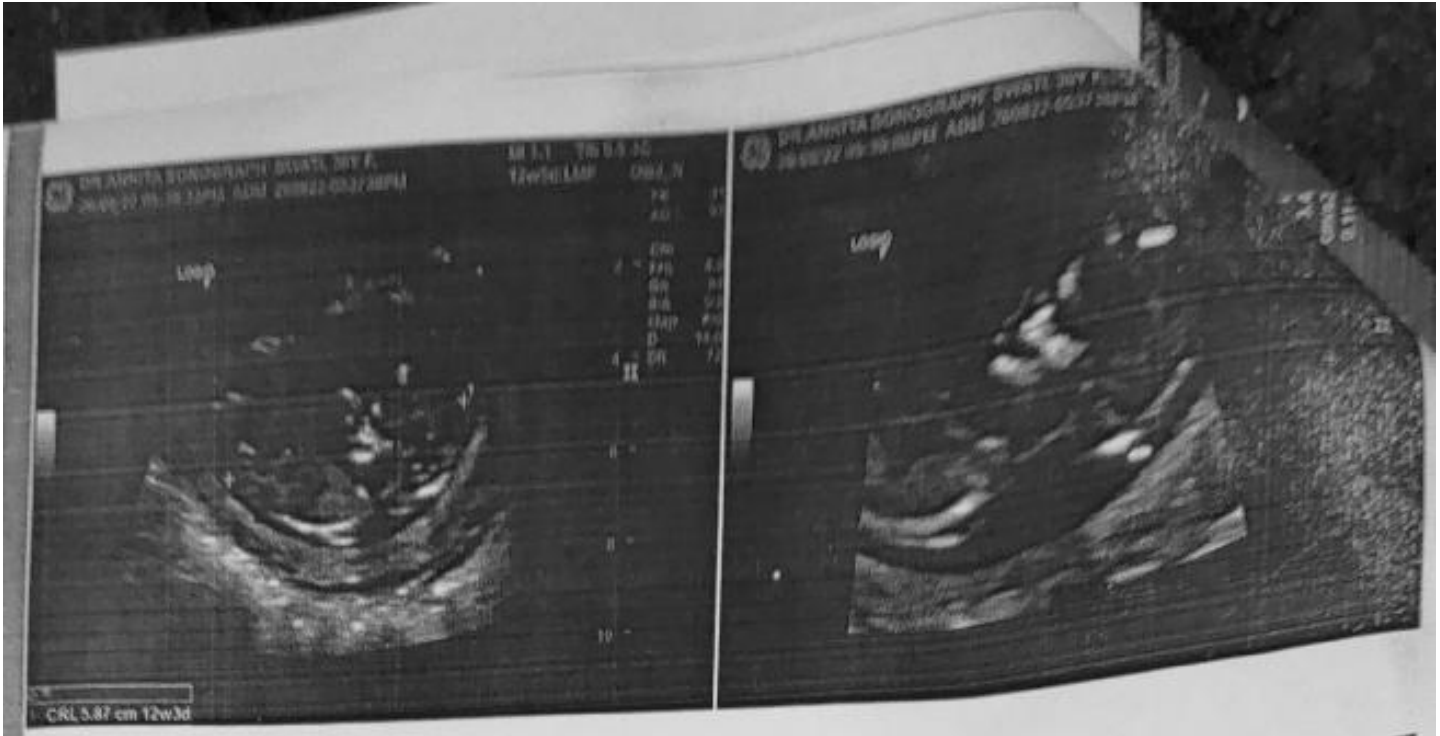
IMPRESSION:

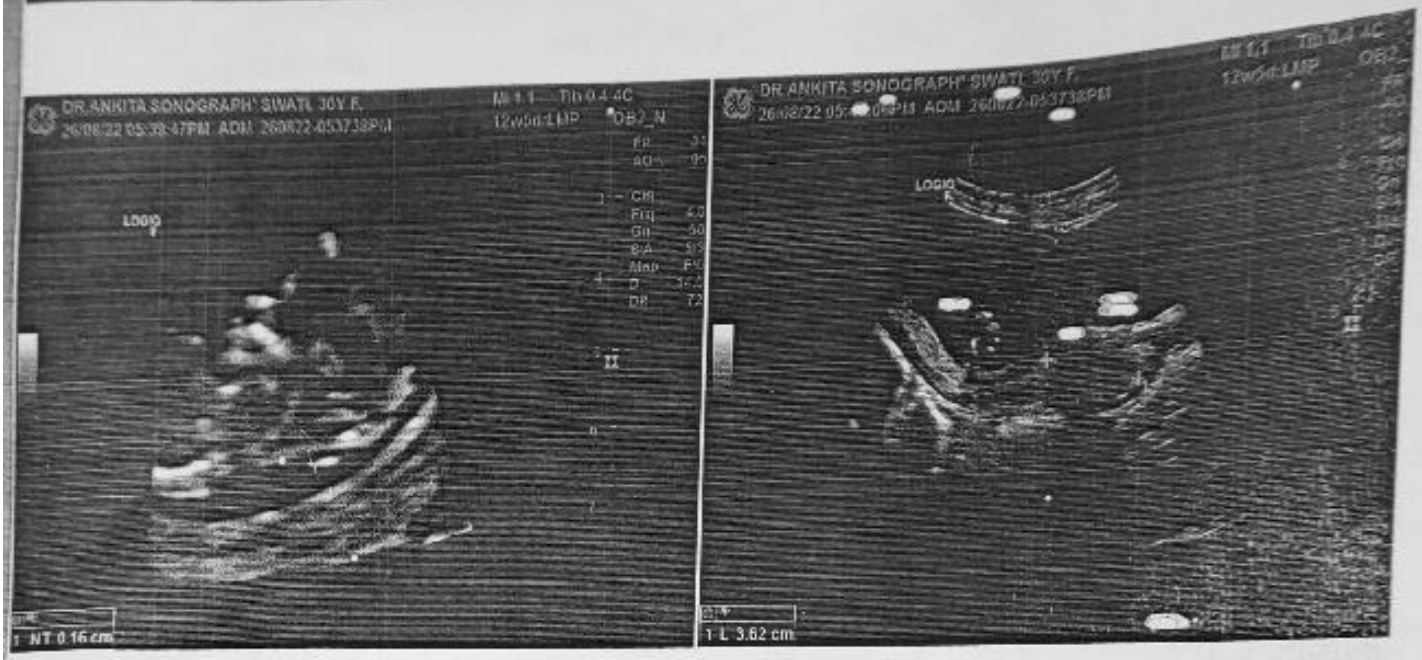
- **Single, live, intrauterine fetus of 12 weeks 3 days +/- 1 week.**
- **Gross fetal morphology is within normal limits.**

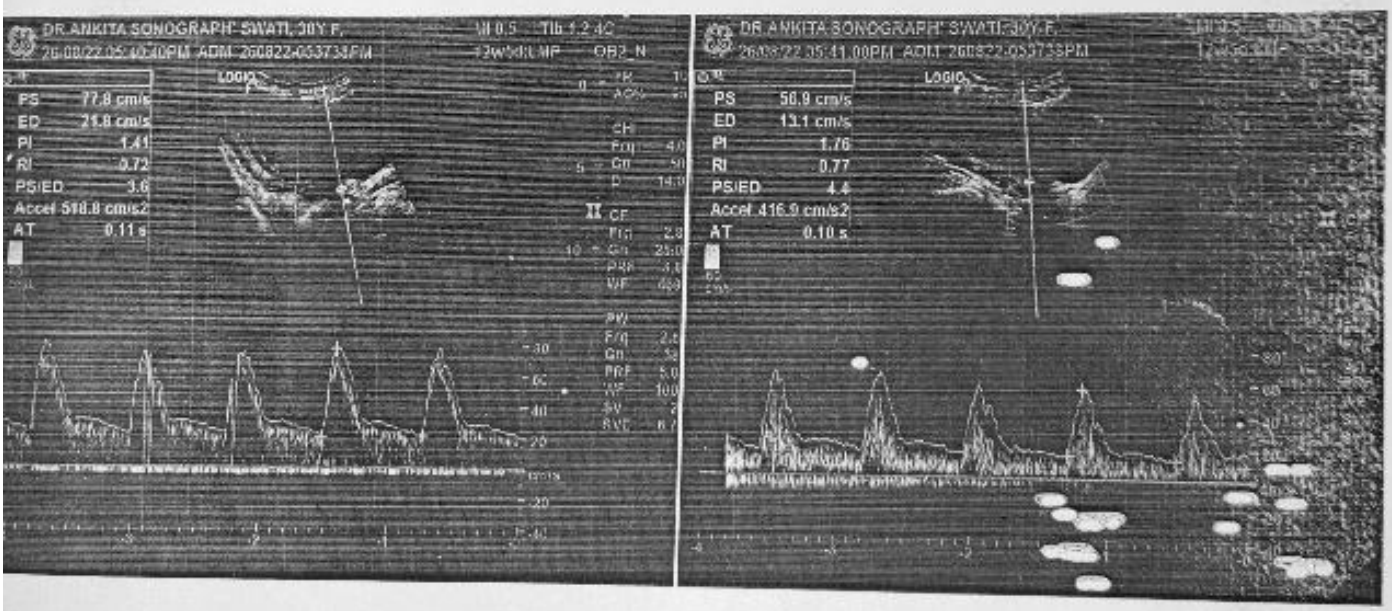
Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

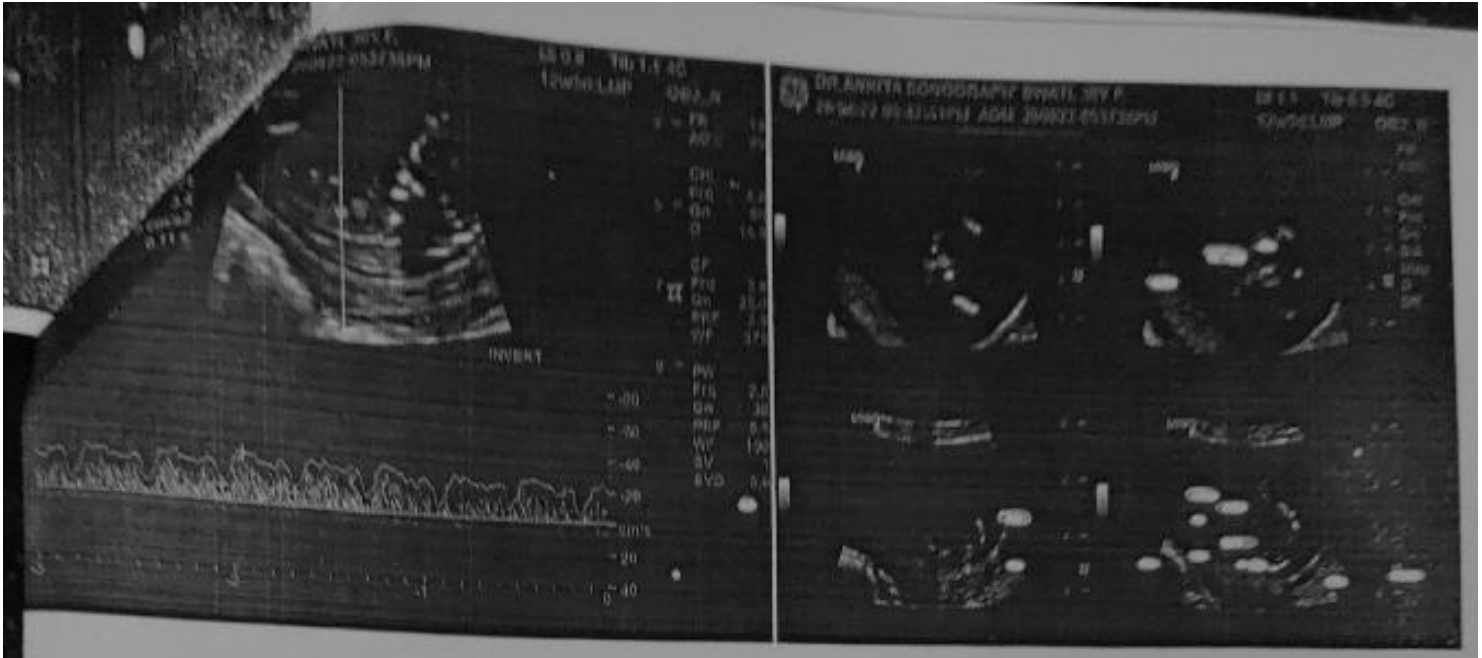
Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been councelled about the capabilities & limitations of this examination.)

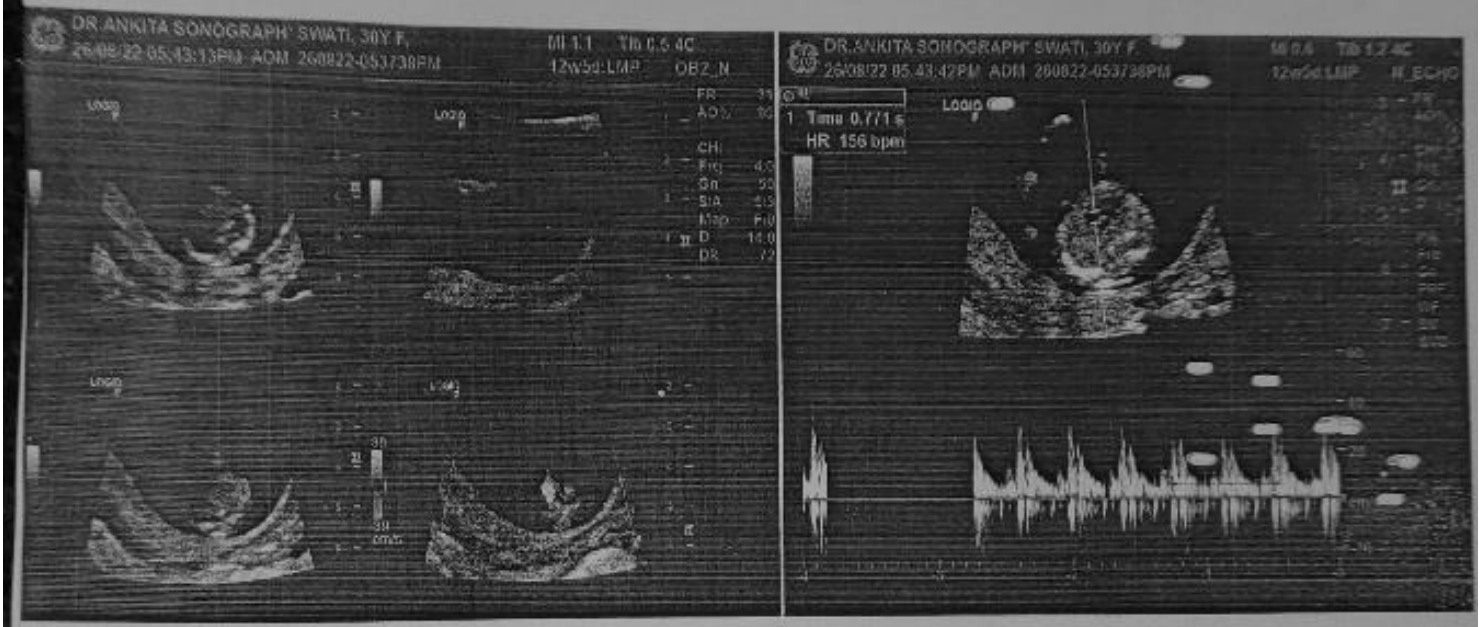
(DR. ANKITA VIJAYVARGIYA)

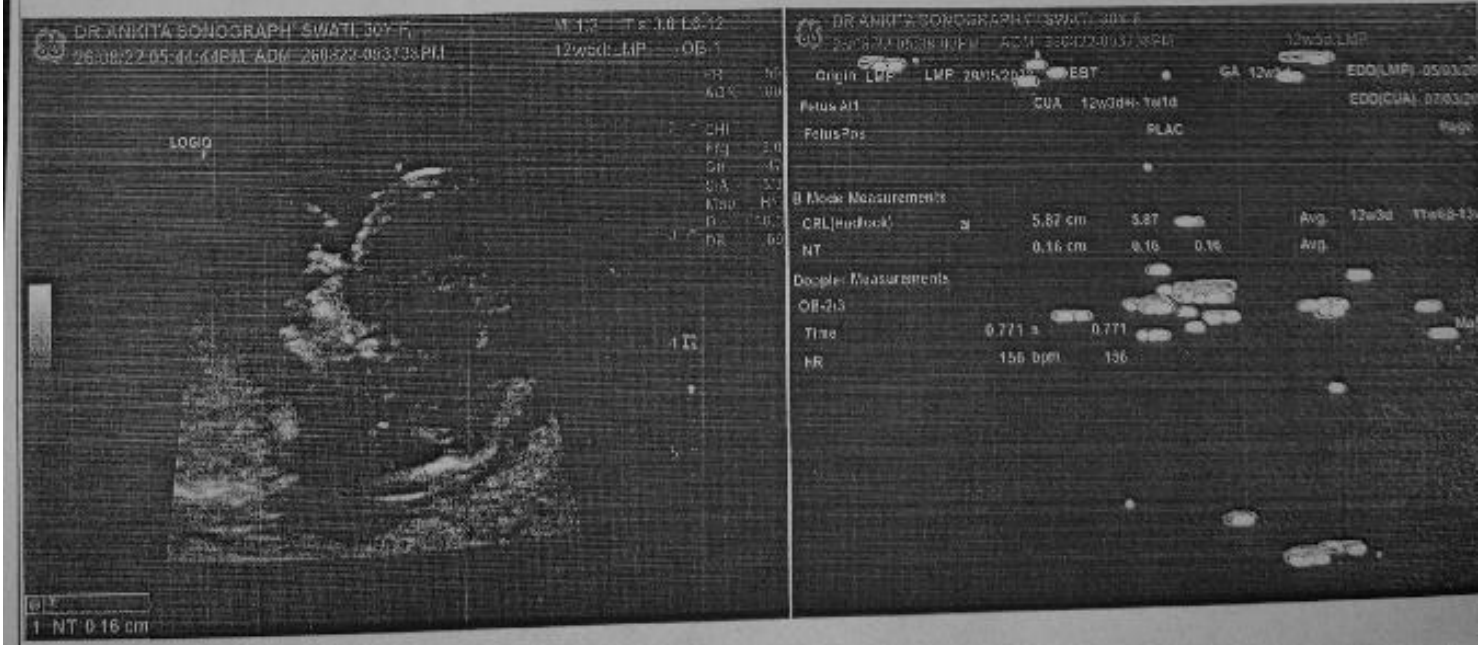

CRL 5.87 cm 12w3d


DR.ANKITA SONOGRAPH' SWATI, 30Y F,
LOGIQ
NT 0.16 cm
LOGIQ
L 3.62 cm


DR.ANKITA SONOGRAPH' SWATI, 30Y F,
LOGIQ
PS 77.8 cm/s
ED 21.8 cm/s
PI 1.41
RI 0.72
PS/ED 3.6
Accel 518.8 cm/s2
AT 0.11 s
DR.ANKITA SONOGRAPH' SWATI, 30Y F,
LOGIQ
PS 56.9 cm/s
ED 13.1 cm/s
PI 1.76
RI 0.77
PS/ED 4.4
Accel 416.9 cm/s2
AT 0.10 s




DR.ANKITA SONOGRAPH' SWATI, 30Y F,
26/08/22 05:43:13PM ADM 260822-053738PM
DR.ANKITA SONOGRAPH' SWATI, 30Y F
26/08/22 05:43:42PM ADM 260822-053738PM
1 Time 0.771 s
HR 156 bpm


DR.ANKITA SONOGRAPH' SWATI, 30Y F,
1 NT 0.16 cm
B Mode Measurements
CRL(Hadlock)
NT
Doppler Measurements
Time
HR