

Patient Name	:	MRS. RAMYA	Reg. ID.No	:	VST-221009-37
Ref By	:	DR LAKSHMI(THUKKUGUDA)	Regn.Date	:	09 Oct 2022
Patient Age	:	30 Years	Report Date	:	11 Oct 2022
Gender	:	Female	Print Date	:	11 Oct 2022 11:42 AM

ULTRASOUND TIFFA SCAN

Suboptimal study due to thick maternal abdominal wall.

FINDINGS :

Single live intrauterine gestation in Unstable lie at the time of scan.
 Foetal body movements are good.
 Foetal cardiac activity good recorded on M-mode.
 Liquor : Mildly Less(9-10cms).
 Placenta :Posterior wall, upper segment ,Grade : I maturity.
 Cervical length : 3.1 cm.
 Internal OS closed ; No funnelling.

BIOMETRY

BPD : 53 mm corresponding to 22 weeks 2 days
 HC : 204 mm corresponding to 22 weeks 5 days
 AC : 170 mm corresponding to 22 weeks 1 day
 FL : 37 mm corresponding to 22 weeks 1 day.
 FHR : 147 beats / min
 EFBW : 493(+/-60gms) gms.
 EGA(USG) :22 weeks and 3 days ; EDD(USG) :09-02-2023.

TARGATED IMAGING FOR FETAL ANOMALIES (TIFFA):

Head:

Midline falx – Normal
 Both lateral ventricles – Normal each
 Transverse cerebellar diameter, normal
 Posterior fossa - Normal
 Intracranial lesion – Nil

Spine :

Entire spine visualised in longitudinal and transverse axis.
 Vertebrae and spinal canal appears normal.
 No Neural tube defects.

Face:

Fetal face seen in the coronal and profile view.
 Both orbits ,nose & mouth appears normal.

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Thorax:

Heart - Four chamber heart noted. Out flow tracks normal.
 Position and axis normal.
 Lungs - Normal.

Abdomen:

Abdominal situs appears normal. Abdominal wall intact and closed.
 Stomach & bowel appear normal. Normal bowel pattern appropriate for the gestation seen. No e/o ascitis.
 Both kidneys appear normal in position

Limbs:

All the fetal long bones are normal for the age of gestation to the extent visualized.
 Both feet appear normal.

Three vessel cord seen & is normally inserted.

IMPRESSION :

***Single live intrauterine gestation of 22weeks 3 days gestational age.**

***Normal Study of TIFFA Scan with mild oligohydramnios.**

Note : Suboptimal study. All anomalies cannot be ruled out by ultrasound, since assessment of fetal anomalies depends on fetal position, liquor volume and period of gestation at time of scan. Ultrasound alone cannot exclude all genetic syndromes or chromosomal abnormalities. Hence report has limitations and is not for medicolegal purposes. Advice Foetal echo for complete evaluation of the heart, as heart anomalies better evaluated with echo. Late onset anomalies cannot be ruled out in present scan. Declaration of doctor conducting ultrasonography : I **Dr. Nalla Spoorthy Reddy** declare that while conducting ultrasonography on **Mrs. Ramya**. I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Dr. Nalla Spoorthy Reddy
MBBS., MD., Consultant Radiologist