



# త్రివేణి హాస్పిటల్

## TRIVENI HOSPITAL



గ్రీన్లాండ్ హాస్పిటల్ గెటు ఎదురుగా, డాక్టర్స్ కాలనీ, సల్గొండ.

**Dr. G. TRIVENI**

M.B.B.S., M.S.(Obgy.)

Obstetrician & Gynaecologist

Infertility Specialist

Regd. No. 52814

23287927

సంప్రదించు వేళలు :

ప్రథమ తాలు గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు  
అదివారం తాలు గం. 10-00 నుండి మామి గం. 2-00 వరకు

Cell: 7569550452, 6302900950

**డా॥ జి. తివేణి**

M.B.B.S., M.S.(Obgy.)

ప్రసూతి మరియు స్త్రీ వ్యాధి నిపుణులు

Regd. No. 52814

Pt.'s Name Kiran Asma

Wt: 54 kgs  
C 3 MA

Temp: 97.5°F

PR: 82 m/s

BP: 120/80 mm Hg

Heart: S1 S2 (P)

Lungs: NAD

LMP: 18/07/2022

DOB: 10/09/2001

Valid 10/12  
NTADM

Coughed

deafness

Abn

prph

PTA-cut just pr

abn

LMP :

EDD :

S.EDD :

ML :

Consanguinity Yes/No.

Menstrual Periods :

Reg/Irregular

R

1. T. Pan - 0  
1 - 150

2. T. Polwati  
+ 0

3. T. fai 200  
1 - 150

1 - 150  
T. Vanita  
1 - 150

T. Ddo 650  
1 - 5

T. Montes 150

T. Ternan 0  
1 - 150

Susp coffee  
100

@

T. Vanita  
1 - 150

MRS ASMA

Date of birth : 10 September 2001, Examination date: 21 October 2022

Address: NALGONDA

Hospital no.: KFC6332

Mobile phone: 8919304208

Referring doctor: TRIVENI

**Maternal / Pregnancy Characteristics:**

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0.

Maternal weight: 49.0 kg; Height: 152.0 cm.

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

Method of conception: Spontaneous;

Last period: 18 July 2022

EDD by dates: 24 April 2023

**First Trimester Ultrasound:**

US machine: E 6. Visualisation: good.

Gestational age: 13 weeks + 4 days from dates

EDD by scan: 24 April 2023

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	157 bpm
Crown-rump length (CRL)	67.0 mm
Nuchal translucency (NT)	1.8 mm
Biparietal diameter (BPD)	22.0 mm
Ductus Venosus PI	1.000
Placenta	anterior low
Amniotic fluid	normal

**Chromosomal markers:**

Nasal bone: present; Tricuspid Doppler: normal.

**Fetal anatomy:**

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

Uterine artery PI:

2.10

equivalent to 1.290 MoM

Endocervical length:

33.0 mm

**Risks / Counselling:**

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 1089	1: 11328
Trisomy 18	1: 2700	1: 11868
Trisomy 13	1: 8458	<1: 20000
Preeclampsia before 34 weeks		1: 160
Fetal growth restriction before 37 weeks		1: 64

# Kalpana Fetal Medicine and Scan Center

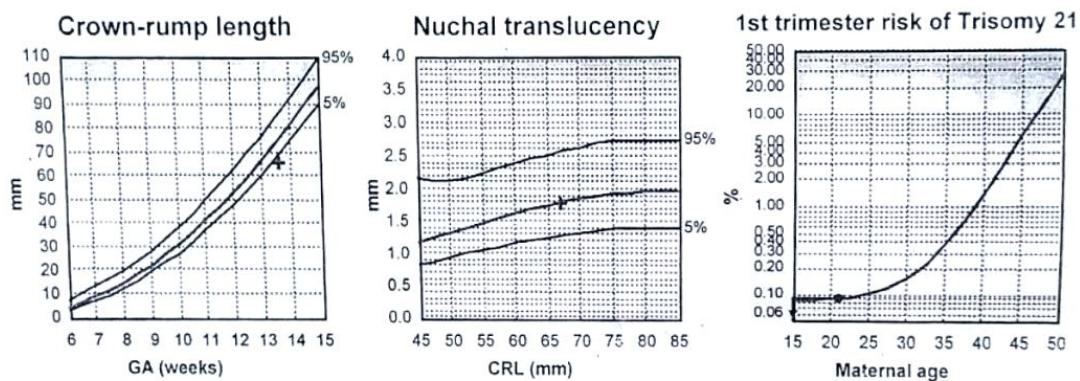
Protecting the Precious...

The background risk for aneuploidies is based on maternal age (21 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).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler. The adjusted risk for PE < 34 weeks or the adjusted risk for FGR < 37 weeks is in the top 10% of the population. The patient may benefit from the prophylactic use of aspirin.

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](http://www.fetalmedicine.com)).



## Comments

Single live intra uterine fetus corresponding to 13 weeks 4 days.

Down syndrome screen negative based on NT scan.

Uterine doppler shows high resistance flow. Suggested to Tab Asprin upto 36 weeks.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. ( Nov 27th to 30th )

I, Dr. L. Kalpana Reddy, declared that while conducting ultrasonography / imaging scanning on Mrs. ASMA, I have neither detected nor disclosed the sex of fetus to any body in any manner.

  
**DR. L. KALPANA REDDY**  
**FETAL MEDICINE CONSULTANT**

**KALPANA FETAL MEDICINE &**  
**SCAN CLINIC**

H.No 8-2-39 Ansari Colony,  
Opp. Govt. Medical College, NALGONDA

# 8-2-71/1/H, గ్రిసలార్డ ప్యాస్టిల్ ఎదురుగు, డాక్టర్స్ కాలనీ, నల్గొండ - 508 001. తెలంగాణ

Page 2 of 2 printed on 21 October 2022 - MRS ASMA examined on 21 October 2022.  
For Appointment : +91 8522 856 854 | +91 9704 234 016