

Dr. Budhrani Sonography

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SONOGRAPHY REPORT

27-Oct-22

NAME-MRS. BHARTI SHREEWAS
REF BY - DR.MRS B.VEGAD

TARGET SCAN

EDD- 01/04/2023 GA BY EDD- 17 wks 5 days
[Reassigned as per dating scan]

Single viable fetus with unstable presentation
Fetal cardiac activity and movements are present.
Quantity of liquor amnii is adequate.
Placenta is Anterior, not reaching up to the internal os. Placental maturity is grade I.
Internal os closed. Cervical length is normal -- 4.6 cm.

Fetal biometry (in mms) :-

BPD - 39
HC - 147
AC - 127
FL - 26
HL- 26
HC/AC- 1.16
FL/AC -0.20
FOOT - 23

UTERINE ARTERY PI :-

Mean Uterine artery PI - 0.60
Right -0.69, Left -0.52

Detailed Anatomical survey :-

Normal fetal situs is noted.
The head appears normal with normal size ventricles, cerebellum, thalamus and third ventricle.
No identifiable intracranial lesion seen.
Nuchal fold thickness - 2.8 mm normal. Cisterna magna appears normal.
Trans cerebellar diameter measures- 16.6 mm.
Lateral ventricle measures- 7.5 mm.

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SONOGRAPHY REPORT

Fetal face seen in the coronal & profile views.
Both orbits, nose & mouth appeared normal.
Nasal bone- 7.7mm. Fetal neck appears normal.

The spine appears normal in size and configuration.
Four chambered heart visualized with normal 3vview. FHR- 150 b/m.
Both lungs seen.
No evidence of pleural or pericardial effusion.

Diaphragmatic movements seen.
Ventral abdominal wall is intact.
The stomach bubble visualized.
Normal bowel pattern appropriate for the gestation.
No e/o any solid or cystic lesion within the abdomen.
Both the kidneys and urinary bladder appear normal.
No evidence of ascites.

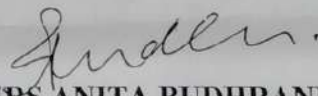
Both upper and lower limbs visualized appear normal.
Three vessels cord visualized with normal insertion.

OPINION : -

- 1. SINGLE VIABLE FETUS WITH UNSTABLE PRESENTATION.**
- 2. FETAL MATURITY IS APPORX 18 WEEKS.[+/- 1wk].**
- 3. ESTIMATED FETAL WEIGHT IS 225 GMS (+/- 22GMS)**
- 4. NO OBVIOUS CONGENITAL ANOMALY IS VISUALIZED.**

(STUDY OF DETAILED FETAL ANATOMY MAY NOT ALWAYS BE POSSIBLE DUE TO TECHNICAL DIFFICULTIES RELATED TO FETAL POSITION, AMNIOTIC FLUID VOLUME, FETAL MOVEMENTS & MATERNAL ABDOMINAL WALL THICKNESS. THEREFORE ANOMALY MAY NOT NECESSARILY BE DETECTED ON EVERY EXAMINATION.) (FEATL ECHO IS NOT INCLUDED IN THIS EXAMINATION.)

I DR. ANITA BUDHRANI HAVE NEITHER DETECTED NOR DISCLOSED THE SEX OF HER FETUS TO ANYBODY IN ANY MANNER.



DR.MRS.ANITA BUDHRANI