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JANTA MATERNITY HOME & HOSPITAL

(A Charitable Hospital)

Jaripatka, NAGPUR - 440 014.

(Registered under Bombay Nursing Home Registration Act 1949-Regn. No. 91)

Under the auspices of JANTA MANDAL, Jaripatka, NAGPUR-440 014

(Registered under Bombay Public Trusts Act 1950-Regn. No. E 528)

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★ SONOGRAPHY REPORT ★

MRS. SNEHA AKASH SAHARE

09-11-2022

Patient's Name : Sneha Sahare

Ref. By : Dr. Swati Bhawe MD

LMP = 10-08-2022

EDD = 17-05-2023

Sonic EDD = 19-05-2023

SONOGRAPHY IN PREGNANCY

- Single, live intrauterine fetus noted with changing positions.
- Fetal movements and Fetal cardiac activity is normal. (FHR 189/ minute)
- BPD = 18.5 mm = 12.6 weeks. HDC = 79.7 mm = 13.3 weeks.
- FML = 7.1 mm = 12.1 weeks ABC = 56.0 mm = 12.3 weeks.
- Av. Fetal gestational age is 12.5 weeks. (CRL = 65.2 mm). EFW = 58 gms.
- Placenta is anterior. It shows grade 0 Maturity. **It is low. It's lower edge 2 cm away from internal Os** There is no e/o retroplacental hematoma. Amount of amniotic fluid is adequate.

OPINION

- Single, live, intrauterine pregnancy of 12.5 weeks noted with changing positions.
- Placenta is anterior, it shows grade 0 maturity. **It is low.**
- Nuchal thickness (1.1 mm) (CRL = 65.2 mm), ductus venosus, nasal bones are within normal limits. OS is closed. Cervix shows normal dimensions.
- No e/o gross sonographically demonstrable fetal congenital anomaly seen.
- **Adv-Anomaly Scan at 20 weeks.**

I have neither detected nor disclosed the sex of the fetus of this pregnant woman to her or any body. This sonography examination is not done for determination of the sex of fetus. ALL the fetal congenital anomalies or fetal inborn defects are not visualized or detected on sonography due to various reasons like: gestational age, thick anterior abdominal wall of patient, unfavourable fetal positions, overlapping of fetal parts, lack of fluid pockets around the fetus: at the time of sonographic examinations. This may require subsequent studies. Any doubts or discrepancies must be followed by / considered for further sonographic examinations. Fetal echo is not the part of this examination. Second opinion may be considered if any discrepancy observed in this report and the clinical findings and then further management may be decided.

Dr. Vinay S Kalikar

MBBS, DMRD

MMC 66845

Radiologist

NOTE: Images Cast X-Ray & Ultrasound depend on various shadows produced by normal & abnormal structures and shadows of many diseases look alike hence may limitation in interpretation of shadows from person to person. The report indicates only of the various possibilities which is to be confirmed with further investigation as required & clinically-patient's identity as revealed by him/her/accompanying person.

All congenital anomalies can not be diagnosed by USG as Assessment of foetal anomalies depends on foetal presentation, patient's built & Abdominal wall thickness, foetal position & movements, liquor volume, limb-plan-face attitude, period of gestation, organogenesis at the time of USG

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PATIENT DATA

LAST NAME SNEHA SAHARE
LMP 10 08 2022
EDD (LMP) 17 05 2023 **GA (LMP)** 13w0d
EXAM DATE 09 11 2022
REPORT DATE 09 11 2022

OB-FETAL

Fetus A

Gestational Age (by AUA)

GA(AUA):12w5d EDD(AUA):19 05 2023

Estim Fetal Weight (Hadlock 4)

Parameter	Value	Unit	GA	GA Range	Author	Rank	Author
EFW(AC, FL, HC, BPD)	58	g				5.3 %	Hadlock

2D Measurements

Parameter	Value	Unit	AUA	GA	GA Range	Author	Rank	Author
BPD	18.5	mm	☑	12w6d	11w5d-14w0d	Hadlock84	18.6 %	Hadlock84
HC	79.7	mm	☑	13w3d	12w2d-14w4d	Hadlock84	39.4 %	Hadlock84
AC	56.0	mm	☑	12w3d	10w5d-14w1d	Hadlock84	39.9 %	Hadlock84
FL	7.1	mm	☑	12w1d	10w5d-13w4d	Hadlock84	11.7 %	Hadlock84
CRL	65.2	mm	☑	12w6d	11w6d-13w6d	Hadlock	32.6 %	Hadlock

Calculations

FL/AC 0.13
 FL/BPD 0.38
 BPD/FL 2.60
 HC/AC 1.42

M-Mode

Fetal Heart Rate

Fetal Heart Rate (2) 189 bpm

GRAPHICS



