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DEPARTMENT OF RADIODIAGNOSIS
ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL
Saket Nagar, Bhopal M P India - 462 020



ULTRASONOGRAPHY REPORT

OBSTETRICS

Patient's Name: Jyoti'sahu

Age: 29 F

Date: 15/11/22

OPD Registration No: 23 9212202005348

Referred By:

USG No.:

LMP - GA by LMP - 20w3d : EDD by LMP - 01/11/23

Number of fetuses - Single

Fetal Position - Variable

Fetal Heart - Present / Heart Rate 144bpm

Placenta Position - Posterior, away from os.

Amniotic fluid - Adequate

Fetal Biometry - All measurements are in cms.

BPD = 20w4d

FL = 19w5d

HC = 20w5d

AC = 20w3d

20w1d

Effective gestational age by USG =

Fetal Weight = 338 ± 50 gm

Screening of Body Parts:

HEAD:

Skull - Normal / dolicocephalic

Nuchal fold thickness- 3.3 mm

Orbital diameter- 10.7 mm

Inter orbital distance- 11.2 mm

Palate, Lips & Nose appear normal





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Brain - Cerebellar diameter (TS) - ^{20.1} mm

Cisterna magna - ^{5.8} mm

Atria of lateral ventricle - ^{6.4} mm

All the above measurements are within normal limits.

Fetal Spine: ☒ Appears normal. (Parallielism of anterior and posterior lamillae is well maintained)

Chest: ☒ Bilateral Lung appear normal in morphology and parenchymal echogenicity.
☒ Diaphragm appears normal

☒ Heart: 4 chambers views suggest normal sizes of all cardiac chambers

☒ Normal situs
☒ Normal outflow tracts

Abdomen: ☒ Cord insertion - Normal
☒ 3 Vessel cord is noted

Stomach: ☒ Bubble well visualized, normal in position.

☒ Normal distribution, diameter and echogenicity of bowel loops.

Kidney: ☒ Bilateral kidneys are normal in size and echogenicity.
☒ No evidence of hydronephrosis.

Urinary Bladder: ☒ appears normal.

Limbs: Humerus length: ^{29.3} mm
Tibial length: ²⁸ mm
Foot length: ^{30.8} mm

Above screening suggest absence of any apparent congenital anomaly.

IMPRESSION: Singlet live intrauterine gestation with EGA by
USG 32 wold with no gross congenital anomaly

DECLARATION

I Dr Kuldeep declare that while performing sonography/ Image scanning of 340H Sahu, I have neither detected nor disclosed sex of the fetus to her or anybody in any manner.
(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 and tissue echogenicity. Therefore all fetal anomalies may not necessarily be detected at every examination. Patient has been counseled about the capabilities and limitations of this examination)

Adh
SONOLOGIST: Dr Kuldeep

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