



SANKALPA MULTI SPECIALITY HOSPITAL

NAME
OPNO
UHID
ADDR
Const

L. PADMA
OP202212275
UH20220317961
NALGONDA
Dr. T. SWATHI MBBS, MS (OBG)
FELLOWSHIP IN REPRODUCTIVE
MEDICINE

AGE/SEX 29 / Female
CONS DATE 27/12/2022
BIL NO 0
MOBILE NO 9871091844
REVIEW DT / /
QUEUE NO 1

23465650

BP: 100/60 mmHg.

PR: 103

SpO₂: 100%

Temp: 98.4

WT: 60 kg

Dot Birth - 10-9-1993
RBS - 97

LMP: 23/8/22

EDD: 30/6/23

POG: 13 + 4 ds

Corrected EDD } immediately Kido's Hypothyroid - on T. Thyronal, 25mg
12/7/23 - 1-0-0

USG: Early intrauterine
gestation of 6
weeks + 4 days POG
FHR: 128 bpm

Primigravida @ 3rd visit POG

LMP: 23-09-2021

DOB: 10-09-1993

C/O - WPPV

Itching (+)

Smell (+)

already taken canard Puzanex
2 days

O/E: Gl fair

Pallor (-)

P/A: Soft, NT

Ach: NT & com

• { CBC, RBS, HIV, HBsAg, VDRL }
B. Grouping
Urine $\left\{ \begin{array}{l} \text{pH} \\ \text{E} \end{array} \right.$

MRS PADMA

Date of birth : 10 September 1993, Examination date: 27 December 2022

Address: NALGONDA

Hospital no.: KFC7918

Mobile phone: 7893920245

Referring doctor: SWATHI

Maternal / Pregnancy Characteristics:

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

Parity: 0.

Maternal weight: 60.0 kg; Height: 154.0 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: 23 September 2022

EDD by dates: 30 June 2023

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 12 weeks + 2 days from CRL

EDD by scan: 09 July 2023

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	164 bpm
Crown-rump length (CRL)	58.0 mm
Nuchal translucency (NT)	1.2 mm
Biparietal diameter (BPD)	18.0 mm
Ductus Venosus PI	0.900
Placenta	anterior low

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: 0.70 — equivalent to 0.420 MoM

Endocervical length: 31.0 mm

Risks / Counselling:

Patient counselled and consent given.

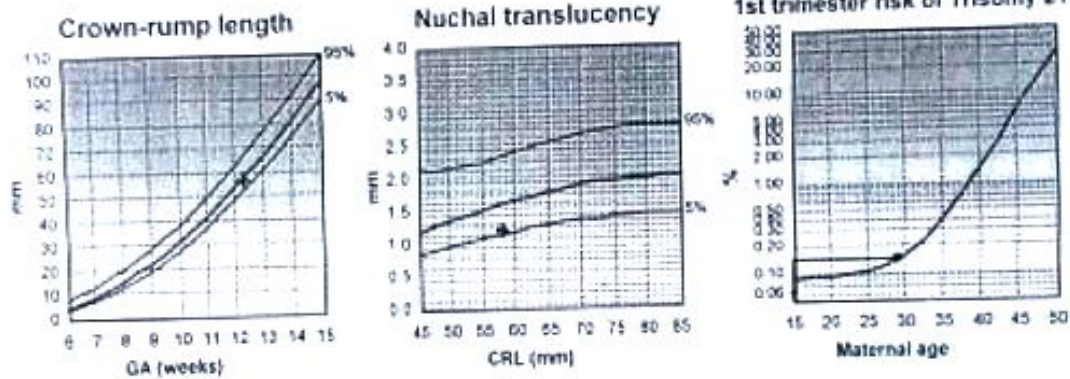
Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 697	1: 13931
Trisomy 18	1: 1653	1: 9166
Trisomy 13	1: 5198	<1: 20000
Preeclampsia before 34 weeks		1: 2077
Fetal growth restriction before 37 weeks		1: 200

The background risk for aneuploidies is based on maternal age (29 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.
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).



Comments

Single live intra uterine fetus corresponding to 12 weeks 2 days.

Down syndrome screen negative based on NT scan.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (Feb 15th to 20th)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT