

8-10-2012



TRIVENI HOSPITAL



గ్రీన్లాండ్ హాస్పిటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ.

Dr. G. TRIVENI

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

Obstetrician & Gynaecologist

Infertility Specialist

Regd. No. 52814

సంప్రదించు వేళలు :

ప్రతిరోజు ఉ. గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు
ఆదివారం ఉ. గం. 10-00 నుండి మ. గం. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి

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

ప్రమాతి మరియు శ్రీలక్ష్మి వ్యాధి నిపుణులు

Regd. No. 52814

Pt.'s Name Laxmi prasanna rao. vishnu Hyderabad Age 24 Sex F

G P L A D = LMA USA

Date : 12/1/12

Valid Upto 1/2/12

Wt : 54 kgs

Temp : 98

PR : 74/min

BP : 100/70 mmHg

Heart : C.C.

Lungs : WAD

*OLE 11:00 AM
PR 100
pin ut 12-14cm
lele*

LMP : 15/10/2012

EDD : 22/7/2013

S.EDD : 20/7/2023

ML : 5 year

Consanguinity Yes/No.

Menstrual Periods :
Reg/Irregular

DOB: 28-06-1987

Adh

Triple mark

7. Varicella
15d

1. T. Pan-1
15d

2. T. Ghelcal
15d

3. T. Juvigun X-1
15d

3. T. Bifolab
15d

4. T. Hapysa SR
15d

8-10-2012



Kalpana Medical Center

Protecting the Precious...

MRS LAXMIPRASANNA

Date of birth : 28 May 1997, Examination date: 18 January 2023

Address: NALGONDA

Hospital no.: KFC8170

Mobile phone: 8121670717

Referring doctor: TRIVENT

Maternal / Pregnancy Characteristics:

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

Parity: 1; Deliveries at or after 37 weeks: 1.

Maternal weight: 58.0 kg; Height: 152.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Preeclampsia in previous pregnancy: no;

Previous small baby: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 15 October 2022

EDD by dates: 22 July 2023

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 14 weeks + 0 days from CRL

EDD by scan: 19 July 2023

Findings	Alive fetus visualised	
Fetal heart activity	148 bpm	
Fetal heart rate	82.0 mm	
Crown-rump length (CRL)	1.6 mm	
Nuchal translucency (NT)	27.0 mm	
Biparietal diameter (BPD)	0.900	
Ductus Venosus PI	ANTERIOR	
Placenta	normal	
Amniotic fluid		

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:	1.55	equivalent to 1.050 MoM
Endocervical length:	30.0 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kaipana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 979	1: 5629
Trisomy 18	1: 2568	1: 9461
Trisomy 13	1: 8061	<1: 20000
Preeclampsia before 34 weeks		1: 938

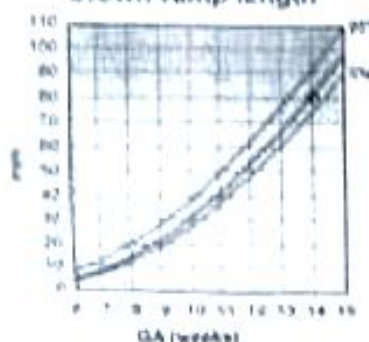
Fetal growth restriction before 37 weeks

The background risk for aneuploidies is based on maternal age (25 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).

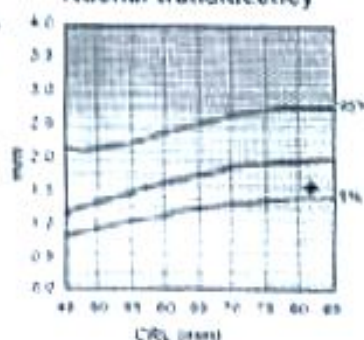
Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler. All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, 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).

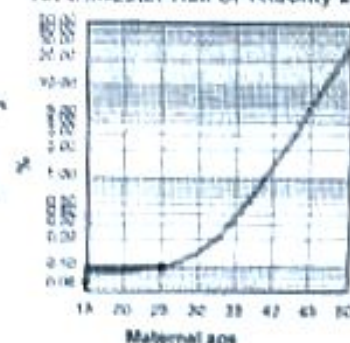
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Comments

Single live intra uterine fetus corresponding to 14 weeks 0 days.

Down syndrome screen negative based on NT scan.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (Feb 24rd to 28th)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT