

REQUEST FORM FOR SCREENING OF



MEDCIS
Healthy testing for Healthy living

TRIPLE MARKER SCREENING (14 – 22.6 weeks)

DUAL MARKER SCREENING (8 - 13.6 weeks)

QUAD MARKER SCREENING (14 – 22.6 weeks)

Patient Name: MRS. DIPAKA SATPUTE

Age: 25y 1F

All the fields are Mandatory:

Date Of Birth (DOB)***	<u>05-10-1998</u>
Diabetic/ Non Diabetic***	<u>Non Diabetic</u>
Weight in Kgs: (as on sampling date)***	<u>73 k.g. / Height 5.2</u>
Number of Foetuses***	<u>2</u>
Normal/IVF***	<u>Normal</u>

Date of sample collection: 28-01-2023

Time of sample collection:

Fill any one:

Last Menopause Period (LMP)	<u>06-09-2022</u>
Expected Date of Delivery (EDD)	<u>13-06-2023</u>
Gestational age as on date of sampling(USG/LMP)	<u>20 weeks</u>

USG Findings: (Attach the Xerox copy of the USG scan)

Additional Information: (If Applicable)

In case of an assisted reproduction, kindly circle the following as applicable:

IVF Donor insemination Donor egg ICSI GIFT any other

Also please provide:

Date of extraction:

Date of transfer:

Date of birth of donor if donor egg is used:

Note: ** For 2nd trimester screening BPD & CRL values are crucial.

*** All the above details must be complete for the acceptance of the sample for testing

Name/Signature (requisitioner)

Date:

MEDCIS (for Office use)

Regn. No:

Date:

Time:

Signature

श्रीहरी

सोनोग्राफी सेंटर

डॉ. देवयानी बावनकर
 MBBS, MD (Radio-Diagnosis)
 CONSULTANT RADIOLOGIST
 Reg. No. 2014/06/2714

PATIENT'S NAME : MRS. DIPIKA SATPUTE
 AGE/ SEX : 25 YEARS / F
 REF. BY : DR. D.KAMDI
 EXAMINATION : USG – ANC (ANOMALY SCAN)
 DATE : 25 / 01 / 2023

वेळ: - सकाळी १० ते सायं. ६ पर्यंत
 (दर रविवार आणि बुधवार)

SONOGRAPHY OF GRAVID UTERUS

OBSERVATION:

TWIN (Dichorionic, Diamniotic) live intra-uterine pregnancies with variable presentation.

Fetal body movements & cardiac activity of both fetuses appears normal.

LMP: 06/09/2022

The gestational age according to LMP (Last menstrual period) is 20 weeks 1 days

EDD by LMP: 13/06/2023

Uterine artery screening doppler study: Mean PI: 0.9

Cervix appears normal, measuring 3.3 cm. Internal os is closed.

Fetal Biometry: FETUS A

BPD:	4.75 cm	20 wks 3 days
HC:	17.9 cm	20 wks 2 days
AC:	14.9 cm	20 wks 1 days
FL:	3.54 cm	21 wks 1 days

The Average gestational age according to this USG Examination is 20 Weeks 4 Days

EDD by USG: 10/06/2023

Placenta is Anterior grade I maturity.

Liquor is adequate for the period of gestational age.

Fetal heart rate: 143 BPM. Fetal weight is 368 gms +/- 57 gms.

ACILITIES: ♦ ABDOMINAL & PELVIC SONOGRAPHY ♦ COLOUR DOPPLER STUDY ♦ OBSTETRIC SONOGRAPHY
 ♦ OVULATION / FOLLICULAR STUDY ♦ TRANSVAGINAL SONOGRAPHY ♦ SMALL PART SONOGRAPHY

गॉट नं. २४, नुतन आदर्श कॉलनी, फिनिक्स कम्प्युटरच्या बाजुला, बस स्टॅण्ड जवळ, चिमूर - 442903

फैदणीसाठी संपर्क - मो.नं. :9028258737

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Fetal Biometry: FETUS B

BPD:	5.14 cm	21 wks 4 days
HC:	18.7 cm	21 wks 0 days
AC:	16.0 cm	21 wks 1 days
FL:	3.24 cm	20 wks 1 days

The Average gestational age according to this USG Examination is 21 Weeks 0 Days

EDD by USG: 05/06/2023

Placenta is Posterior grade I maturity.

Liquor is adequate for the period of gestational age.

Fetal heart rate: 134 BPM. Fetal weight is 373 gms +/- 58 gms.

Fetal Anatomy: (For both Fetuses)

Head : Cisterna magna measures (FETUS A 0.5 cm, FETUS B 0.4 cm)
 Midline falx seen.
 Ventricular system appears normal in dimension.
 Choroid plexus is normally placed and show usual echogenicity.
 Posterior fossa appear normal.
 No hydrocephalus or identifiable intracranial lesion.

Neck : Neck appears normal.

Spine : Vertebrae and spinal canal appears normal.

Face : Both orbits, nose and mouth appear normal.

Thorax : No e/o pleural or pericardial effusion.
 No e/o SOL in the thorax.

Heart : Normal cardiac situs.
 Four chamber view normal. Outflow tracts appear normal.

Abdomen : Abdominal situs appears normal.
 Stomach bubble is in its usual position.
 Bowel loops show usual echogenicity.

KUB : Both kidneys are corresponding in length with fetal age.
 No pelvicaliectasis.
 Urinary bladder is well distended.

Extremities : Fetal limbs appear normal.

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IMPRESSION:

- Twin live intrauterine fetuses of sonic gestational age of FETUS A 20 weeks 4 days, FETUS B 21 weeks 0 days with variable presentation.
- No obvious congenital anomalies in both fetuses in present scan.

Declaration :- I have neither detected nor disclosed the sex of the fetus of pregnant women to anybody as laid in rule 10 (IA)

Note :-

- 1) This is a Professional Opinion only and not the final Diagnosis.
- 2) No ultrasonography finding is pathognomonic, all findings are only suggestive, hence they should be reviewed with the relevant clinical examination & relevant investigations before embarking upon the final Diagnosis and proceeding for Management (Medical or Surgical)
- 3) Not all gross congenital anomalies of fetus are apparent during scanning due to difficult & variable position attained by the fetus. Hence this USG scan cannot exclude all gross congenital fetal anomalies. Fetal cardiac anomalies are not included, ask for fetal echocardiography whenever suspected.
- 4) Whenever suspect congenital anomalies, ask for targeted scan along with serum alpha fetoprotein estimation.
- 5) In case of Disparity between clinical and Sonographic/X-ray findings, please send patient again for review.
- 6) This report is not valid for medico legal purposes.

DR. DEVYANI BAWANKAR- MBBS, MD
CONSULTANT RADIOLOGIST

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