

Dr. Pooja Shrivastava

MBBS

MS (Obstetrics & Gynaecology)

Reg No. MP-4298

Trained in : Gynaecological Endoscopy Laparoscopy & Hysteroscopy. Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning

- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai.
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

Obstetrician & Gynaecologist



LH-A-008028

Date : 28-Jan-2023

Name : MRS. PREETI PREMSHARMA

Age/Sex : 30 Years / Female

Address : Abdullah Ganj

Mobile No.: 6264584596

Gest 32 Lo
2/11/22
2/11/22
16)

18kg all
fate
water
5am
27
N/A

cut N/A
9/8/22

cut 1/11/22

Adm

Obstetric
N/A, N/A
11/6

CR 96 (900)

RR 96

SpO2 96

Temp 98.6

Pulse 114

BP 107/64

Wt 57.6kg

12-14

Am 2m

Law 11

App 2m

+

Post Nandu m 100

Cy 100

Adm

Sample
water
for

Wants
con
4/2/22

In Emergency Call : 9425005377

Email id : poojadr2003@gmail.com

Signature

4/2/22



Lotus Hospital

LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal

Ph.: 0755-4093322, 6262093322

Dr. Pooja Shrivastava

MBBS

MS (Obstetrics & Gynaecology)

Reg No. MP-4298

Trained in : Gynaecological Endoscopy Laparoscopy & Hysteroscopy, Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning

- Ex. Resident Gynaecologist MY Hospital Indore
- Trained in Obstetric Ultrasonography, Wadia Hospital
- Ex. Consultant Gynaecologist and Sonologist Ultrasonography programme J.P. Hospital, Bhopal

Obstetrician & Gynaecologist



LH-A-008028

Date : 28-Jan-2023

Name : MRS. PREETI PREM SHARMA

Age/Sex : 30 Years / Female

Address : Abdullah Ganj

Mobile No.: 6264584596

Gest 33 Lo
2/11/22
16/11/22

18/11/22
all
fall
under
hand

19/11/22
N/A
9/1/23

11/1/22
Adm

Obstetric
NT, NB scan
11/1/22

CRN 96 (GMM)
PBB 96 (GMM)
on 11/1/22
1/1/23

Am 2m
low in
appetite 2m

BP 107/64

Pulse 114/min

Temp 97.6°F

SpO2 99%

wt - 57.6 kg

12-14

mean
to come
sur
the
in

Post Nausea in 1st
Cy 1000ml

Adm
sample
water
sur

I want to
come
sur
the
in

In Emergency Call : 9426005377

Email id : poojad2003@gmail.com



Lotus Hospital

LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal

Ph.: 0755-4093322, 6262093322

Signature

Dr. Pooja Shrivastava
28/1/23

30 JAN 2023

0 TAB NALOXONE 1mg
1 TAB SODIUM 1mg
0 CAP PIRENIDINE 1mg
2 TAB METOPROLOLOL 50mg
↓
↓

BP - 110/64
Pulse - 110 bpm
Temp - 97.4°F
SpO2 - 98.1%
wt - 51.7 kg

lung
cancer

1 month

01 FEB 2023

Aspirin 100mg

Aspirin
100mg
daily

BP - 112/68
Pulse - 110 bpm
Temp - 97.0°F
SpO2 - 98.1%
wt - 52.3 kg

2

अंकिता विजयवर्गीय

डि. बी. बी. एस., डि. एम. आर डि
एम. आर आई. फेलोशिप :
नानावटी हॉस्पिटल, मुंबई
हिंदुजा हॉस्पिटल, मुंबई
पूर्व रेडियोलॉजिस्ट :
फोर्टिस हॉस्पिटल, नोएडा
जी. टी. बी. हॉस्पिटल, दिल्ली
रीजेसी हॉस्पिटल लिमिटेड, कानपुर
जवाहर लाल नेहरू कैंसर हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

FMF Certified from
Fetal Medicine Foundation
Reg. No. MP-8932

MRI FELLOWSHIPS :

- NANAVATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI

FORMER RADIOLOGIST AT:

- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

PATIENT'S NAME : MRS. PREETI

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS)

AGE/SEX : 30 Y/F

DATE : 28.01.2023

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 02.11.2022 (Corrected according to dating scan)

GA(LMP) : 12wk 3d

EDD : 09.08.2023

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 159 beats /min.
- PLACENTA: is grade I, high posterior & not low lying.
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR.
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 1.8 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 0.75)

FETAL GROWTH PARAMETERS

■ CRL 64.2 mm ~ 12 wks 6 days of gestation.

- Estimated gestational age is 12 weeks 6 days (+/- 1 week). EDD by USG : 06.08.2023
- Internal os closed. Cervical length is WNL (34.8 mm).
- Baseline screening of both uterine arteries was done with mean PI ~ 1.95 (WNL for gestation)
- Date Of Last Delivery 02.12.2015
- Gestation at delivery of last pregnancy 37 weeks 6 days.

IMPRESSION:

- Single, live, intrauterine fetus of 12 weeks 6 days +/- 1 week.
- Gross fetal morphology is within normal limits.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (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 & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

(DR. ANKITA VIJAYVARGIYA)

First Trimester Screening Report

Sharma Preeti

Date of birth : 01 January 1993, Examination date: 28 January 2023

Address: D-5 rajharsh colony
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

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

Parity: 3; Deliveries at or after 37 weeks: 3.

Maternal weight: 57.6 kg; Height: 152.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Preeclampsia in previous pregnancy: no; Previous small baby: no; Patient's mother had preeclampsia: dont know.

Method of conception: Spontaneous;
Last period: 02 November 2022

EDD by dates: 09 August 2023

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 12 weeks + 3 days from dates

EDD by scan: 09 August 2023

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	159 bpm	
Crown-rump length (CRL)	64.2 mm	
Nuchal translucency (NT)	1.8 mm	
Ductus Venosus PI	0.750	
Placenta	posterior high	
Amniotic fluid	normal	
Cord	3 vessels	

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.95	equivalent to 1.210 MoM
Mean Arterial Pressure:	79.1 mmHg	equivalent to 0.950 MoM
Endocervical length:	34.8 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 647	1: 12935
Trisomy 18	1: 1582	<1: 20000
Trisomy 13	1: 4962	<1: 20000
Preeclampsia before 34 weeks		1: 1919

First Trimester Screening Report

1: 213

Fetal growth restriction before 37 weeks

The background risk for aneuploidies is based on maternal age (30 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, tricuspid Doppler, ductus venosus Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

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).





