



త్రైవేణి హాస్పిటల్

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

23626751

సంప్రదింపు వేళలు :
ప్రసవశాల ఈ గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు
అధికారము ఈ గం. 10-00 నుండి మే గం. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి

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

ప్రసూతి మరియు స్త్రీల వ్యాధి నిపుణులు

Regd. No. 52814

Pt.'s Name P. Nagarani Wt: 45 kgs Age 24 Sex F

GPLAD

E SMA E USG

Date: 21/2/23

Valid Upto: 7/3/23

Wt: 45 kgs

Imp: (u)

PR: 78 md

BP: 100/70 mmHg

Heart: S1S2

Lungs: NAD

DOB: 06/06/1997

E Hypothu

PFM ⊕

O/E G.C. Far

After

PR: 80 km

Plac. ut 20-22 wk

FP ⊕

relieve

PV: Anterior

LMP: 05/10/2022

EDD:

S.EDD:

ML:

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

Adv

⊕ M ⊕

7/3/23

O/E CT, HbA1C
CBP, COE
Scan. S/G

R

1. T. Pain

1-15d

2. T. Fallow

1-15d

3. T. Zoon

1-15d

4. PL Protpon

Cruck

5. Syp Vitegen

100 cpl



Kalpana Fetal Medicine and Scan Center

Patient name	Mrs. NAGARANI	Protecting the Previous	Age/Sex	24 Years /
Patient ID	KFC7372		Visit No	4
Referred by	Dr. TRIVENI		Visit Date	20/02/2023
LMP Date	20/09/2022	LMP EDD: 27/05/2023[21W 6D] C-EDD: 12/07/2023[19W 5D]		

OB - 2/3 Trimester Scan Report

Indication(s)

TIFFA SCAN

Real time B-mode ultrasonography of gravid uterus done

Route: Transabdominal

Single Intrauterine gestation

Maternal

Cervix measured 3.10 cms in length.

Right uterine PI : 0.8,

Left uterine PI : 1.1

Mean PI : 0.95

Fetus

Survey

Presentation - VARIABLE

Placenta - Posterior

Liquor - Normal

Single deepest pocket = 5

Umbilical cord - Two arteries and one vein

Fetal activity present

Cardiac activity present

Fetal heart rate - 144 bpm

Biometry (Mediscan)

BPD 47 mm 20W 1D	HC 168 mm 19W 3D	AC 137 mm 19W 1D	FL-Rt 30 mm 19W 2D	EFW BPD,HC,AC,FL grams
5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50%

Cephalic index - 78 Range 75-85%

TCD : 20 mm

Aneuploidy Markers

Nuchal Fold : 3.1 mm

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8-2-71/1/ఎ, గ్రీన్‌లాండ్ హాస్పిటల్ ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ - 508 001. తెలంగాణ
For Appointment : ☎ +91 8522 856 854 | +91 9704 234 016



Kalpana Fetal Medicine and Scan Center

Protecting the Precious...

Mrs. NAGARANI / KFC7372 / 20/02/2023 / Visit No 4

Estimated fetal weight according to BPD, AC :- 310 +/- 31 FL, AC :- 278 +/- 27.8 gms.

Fetal Anatomy

Head

Left lateral ventricle measured 6.6 mm

Cisterna magna measured 4.5 mm

Midline falx seen

Both lateral ventricles appeared normal

Posterior fossa appeared normal

No identifiable intracranial lesion seen

Left cp cyst measuring - 9 X 8 mm.

Neck

Fetal neck appeared normal

Spine

Entire spine visualised in longitudinal and transverse axis.

Vertebrae and spinal canal appeared normal

Face

Fetal face seen in the coronal and profile views

Both orbits, nose and mouth appeared normal

Thorax

Both lungs seen.

No evidence of pleural or pericardial effusion.

No evidence of SOL in the thorax.

Heart

Heart appears in the mid position.

Normal cardiac situs. Four chamber view normal.

Outflow tracts appeared normal.

Abdomen

Abdominal situs appeared normal.

Stomach and bowel appeared normal.

Normal bowel pattern appropriate for the gestation seen.

No evidence of ascites.

Abdominal wall intact.

KUB

Right and Left kidneys appeared normal.

Bladder appeared normal

Extremities

All fetal long bones visualized and appear normal for the period of gestation.

Both feet appeared normal

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Fetal doppler

Umbilical Artery PI : 1.1

Impression

Single intrauterine gestation corresponding to a gestational age of 19 Weeks 5 Days

Gestational age assigned as per biometry (CRL) on 28/11/2022

Menstrual age 21 Weeks 6 Days

Corrected EDD 12-07-2023

Placenta - Posterior

Presentation - VARIABLE

Liquor - Normal

Estimated fetal weight according to BPD,AC :- $310 \pm 1 - 31$ FL,AC :- $278 \pm 1 - 27.8$ BPD,HC,AC,FL :- $282 \pm 1 - 28.2$ gms.

LEFT SIDED CHOROID PLEXUS CP CYSTS.

Left cp cyst measuring - 9×8 mm.

I have explained to the couple that CPCs are NOT brain defects and will not cause mental handicap. In majority of the cases, this is benign and transient. It is a marker for Trisomy 18 (Edward's Syndrome). However, in this chromosomal abnormalities, there are many associated fetal defects and fetal growth restriction. In the absence of these, the risk for Edward's Syndrome for this baby is very small.
The definitive test to assess fetal chromosomes is only by invasive testing, which carries a procedure related risk of miscarriage of about 1:300.

Suggested QUADRUPLE MARKER.

Suggested GROWTH SCAN at 28 to 30 weeks.

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

Dr. L. KALPANA REDDY MBBS ONB (OBG) FMF (UK)
FETAL MEDICINE CONSULTANT

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