



త్రివేణి 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

23626431

Cell: 7569550452, 6302900950

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

ప్రసూతి మరియు స్త్రీల వ్యాధి నిపుణులు

Regd. No. 52814

P. Jay

Pt.'s Name Mrs. Kalyani K. J. Jonalamma, Nalgonda

Age 33 Sex F

GPLAD

E L M A C C S C
Hypoth

Date: 8/3/23

Valid Upto 22/3/23

Wt : 86 kgs

Temp : 98.6 F

PR : 82/min

BP : 110/80 mm Hg

Heart : S1 S2

Lungs : clear

DOB: 10-04-1989

Doubt marks

23 TT 1 CE 1000

T. Ocular 150

T. Privation 1000
1 150

T. Semi-M
1 50

10 Ncan
01660 fan
After
PR 100
PR 500
Just just per

LMP : 08-12-2022

EDD :

S.EDD :

ML :

Consanguinity Yes/No.

Menstrual Periods :

Reg/Irregular

- R
1. T. Panase
1-150
 2. T. Zentur
+150
 - 3 T. Trest PHA
1 150

21/3/23/150

Alpana Fetal Medicine and Scan Center

Protecting the Precious...

MRS KALYANI

Date of birth : 10 April 1988, Examination date: 08 March 2023

Address: NALGONDA

Hospital no.: KFC8228

Mobile phone: 7702516268

Referring doctor: TRIVENI

Maternal / Pregnancy Characteristics:

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

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

Maternal weight: 85.0 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: 08 December 2022

EDD by dates: 14 September 2023

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 12 weeks + 6 days from dates

EDD by scan: 14 September 2023

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	162 bpm ✓
Crown-rump length (CRL)	60.1 mm ✓
Nuchal translucency (NT)	1.3 mm ✓
Biparietal diameter (BPD)	19.6 mm ✓
Ductus Venosus PI	1.100 ✓
Placenta	posterior low
Amniotic fluid	normal

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: 1.05 equivalent to 0.660 MoM

Endocervical length: 30.0 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

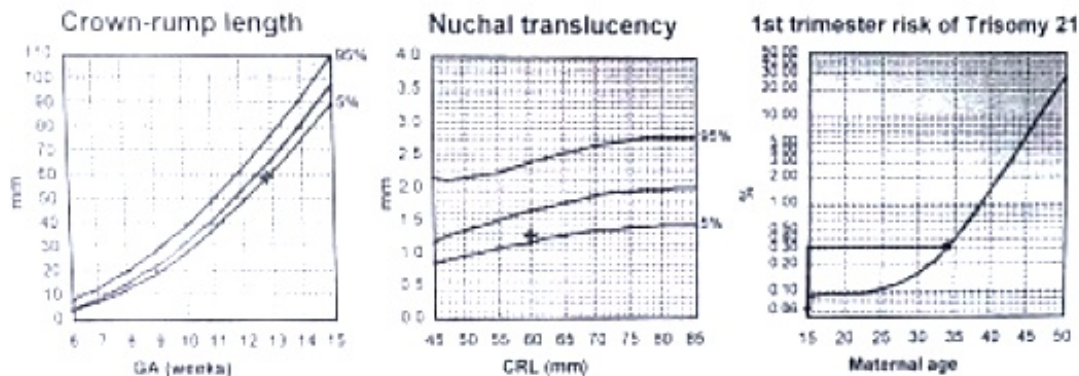
Condition	Background risk	Adjusted risk
Trisomy 21	1: 278 ✓	1: 5091 ✓
Trisomy 18	1: 666 ✓	1: 3458 ✓
Trisomy 13	1: 2093 ✓	<1: 20000 ✓

Pre-natal Screening Report Fetal Medicine and Scan Center

Protecting the Precious...

The background risk for aneuploidies is based on maternal age (34 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). 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 6 days.

Down syndrome screen negative based on NT-scan.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (April 22nd to 26th)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT