

QSP-02/04

Date of Shipment

PCC Code

TEST REQUISITION FORM

 **PathCare Diagnostics™**
(A UNIT OF PATHCARE LABS PVT.LTD.)Patient Name **Radhika Nikhil chinchwadkar**Gender **M** **F** Age **31** Years Months DaysDate of Birth **DD** **MM** **YY**

Referring Physician

Name & Address

Krishna lab

Phone #:

Vial ID

Sample Type / Origin

23955102

Specimen Collected By

Prepared By

Sample Collection Details

Date

Time

Test Name / Codes

TSH**Double marker****DOB - 8-4-1992****weight - 65 kg**

Number of Sample Containers

Clinical Details / History

Attach additional clinical data if any)

Last Menstrual Period (LMP)

Mandatory for all gynaecologic specimen

Specimen Receipt Details (FOR OFFICIAL USE ONLY)

Number of Samples Received

Condition of Receipt

A **R** **F**

Date of Receipt

DD **MM** **YY**

Time of Receipt

HH **MM**

Received By

For reporting time & charges or call nearest franchisee for details or visit www.pat

First Trimester Screening Report

CHINCHWADKAR RADHIKA NIKHIL

Date of birth : 08 June 1992, Examination date: 11 April 2023

Address: Hujur Galli
Kolhapur
India

Mobile phone: 9359703961

Referring doctor: Rashmi N. Patil

Address: Kasaba Bawda
Kolhapur

Maternal / Pregnancy Characteristics:

Previous chromosomally abnormal child or fetus: NO.

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

Parity: 0; Spontaneous deliveries between 16-30 weeks: 0.

Maternal weight: 65.0 kg; Height: 160.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 09 January 2023




EDD by dates: 16 October 2023

First Trimester Ultrasound:

US machine: Volusion E6. Visualisation: good.

Gestational age: 13 weeks + 1 days from dates

EDD by scan: 16 October 2023

| Findings | Alive fetus | |
|---------------------------|---------------------|---|
| Fetal heart activity | visualised | |
| Fetal heart rate | 165 bpm |  |
| Crown-rump length (CRL) | 66.0 mm |  |
| Nuchal translucency (NT) | 1.4 mm | |
| Biparietal diameter (BPD) | 25.0 mm | |
| Ductus Venosus PI | 0.780 |  |
| Placenta | Fundal and anterior | |
| Amniotic fluid | normal | |

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: Normal; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Comments: Intracranial translucency measures 1.9 mm..

First Trimester Screening Report

| | | |
|-------------------------|-----------|-------------------------|
| Uterine artery PI: | 1.56 | equivalent to 0.990 MoM |
| Mean Arterial Pressure: | 88.2 mmHg | equivalent to 1.040 MoM |
| Endocervical length: | 31.0 mm | |

Risks / Counselling:

Patient counselled and consent given.

Operator: Pallavi Dr Patil, FMF Id: 154822

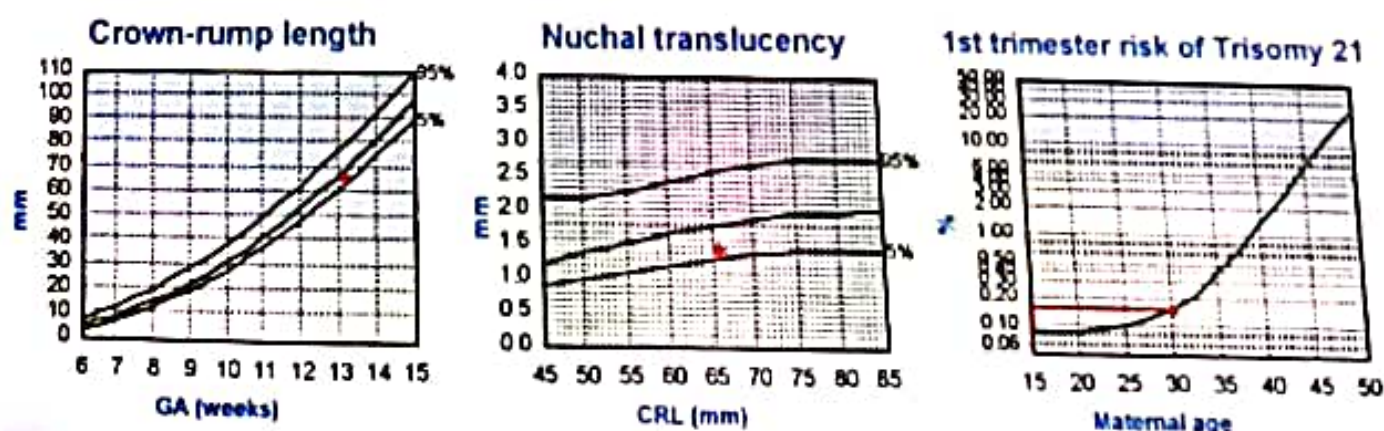
| Condition | Background risk | Adjusted risk |
|--|-----------------|---------------|
| Trisomy 21 | 1: 587 | 1: 7126 |
| Trisomy 18 | 1: 1448 | 1: 6559 |
| Trisomy 13 | 1: 4539 | <1: 20000 |
| Preeclampsia before 34 weeks | | 1: 490 |
| Preeclampsia before 37 weeks | | 1: 117 |
| Fetal growth restriction before 37 weeks | | 1: 181 |
| Spontaneous delivery before 34 weeks | | 1: 80 |

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, 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).



Comments