

mos. Chanda Saini 23/1/19

DOB - 17-9-2000

weight - 68 kg

H - 5 Feet





# SONOGRAPHY & DOPPLER CLINIC

Timing : 10.00 AM to 4.00 PM

## Dr. Renuka V. Garg

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|                         |                          |
|-------------------------|--------------------------|
| Name:- MRS CHANDA SAINI | Ref by:- DR RICHA JHAVAR |
| Age /sex:- 23Y/F        | Date:- 04/05/2023        |

### USG OBSTETRICS( FIRST TRIMESTER SCAN)

|                 |                    |                       |
|-----------------|--------------------|-----------------------|
| LMP- 30/01/2023 | Clinical GA- 13W3D | EDD by LMP-06/11/2023 |
|-----------------|--------------------|-----------------------|

**A Single live intrauterine fetus is seen with variable position presently GA by USG 12weeks 6days. FHR— 159beats/min.**

|     |        |                  |
|-----|--------|------------------|
| CRL | 63.6mm | GA 12weeks 6days |
|-----|--------|------------------|

**Placenta is ANTERIOR, Grade 0. Reaching the internal os at present scan.**

Internal Os and cervical canal are closed. **Cervical Length- 3.4cm.**

Liquor is adequate. EDD by present USG: - 10/11/2023

**NT—1.0mm.** IT , NB-2.3mm, and retronasal triangle seen.

Stomach bubble, both orbits, both kidneys and all four limbs seen.

Fetal spine, Midline falx and choroid plexus seen. **Ductus venosus** shows normal waveform with positive a wave. 3 vessel cord seen.

**Bilateral uterine arteries:- Right uterine PI-1.4, Notch-absent.**

**Left uterine PI-1.7, Notch-absent. Mean PI of – 1.6 (50<sup>th</sup> percentile)**

**IMP: - A single live intrauterine fetus of gestational age 12weeks 6days by USG.**

ADV: - Clinical correlation.

All measurements including estimated fetal weight are subject to statistical variations. Not all anomalies can be detected on sonography. I Dr Renuka V Garg declare that while doing ultrasound of this patient MRS CHANDA SAINI, I have neither detected nor disclosed the sex of the fetus to anybody in any manner.

Dr Renuka Garg

*"Focus with Compassion"*

This report is an opinion not final diagnosis. It should be correlated clinically with history and examination of patient. In case of any discrepancy a review can be asked. Not valid for medicolegal purpose.