



TEST REQUISITION FORM (TRF)



Patient Details (PLEASE FILL IN CAPITAL LETTERS ONLY):

Name : Mrs. Renuka Pawar
Age : 29 Yrs : _____ Months _____ Days
Sex : Male ☐ Female ☒ Date of Birth : DD MM YYYY
Ph : _____

Client Details :

SPP Code PV200
Customer Name _____
Customer Contact No _____
Ref Doctor Name _____
Ref Doctor Contact No _____

Specimen Details:

Sample Collection date : 9/5/20 Specimen Temperature : Sent _____ Frozen (<-20°C) ☐ Refrigerator (2-8°C) ☐ Ambient (18-22°C) ☐
Sample Collection Time : _____ AM / PM Received _____ Frozen (<-20°C) ☐ Refrigerator (2-8°C) ☐ Ambient (18-22°C) ☐

Test Name / Test Code

Sample Type

SPL Barcode No

Double marker
ultra TSH

Serum 24266728

Clinical History:

DOB - 06/06/1994 wt - 60.1kg

No. of Samples Received:

Received by:

Attach duly filled respective forms viz. Maternal Screening form (for Dual, Triple & Quad markers), HIV consent form, Karyotyping History form, IHC form, HLA Typing form along with TRF.

Monday, May 01, 2023

NAME : MRS. RENUKA PAWAR
AGE / SEX : 29 YEARS / FEMALE
REF.BY : DR. SMITA SATALE



OBSTETRIC ULTRASOUND (NT SCAN)

LMP: 01/02/2023

GA (LMP): 12 WEEKS 5 DAYS

EDD(LMP): 08/11/2023

A single intra uterine gestational sac is noted with smooth margins containing a single live fetus.

Fetal cardiac activity and fetal movements appear normal. **FHR - 149 b/min.**

Foetal gestational parameters are:-

CRL = 6.87 cms. = (13 weeks 1 day)

Nuchal translucency is within normal limits and measures 1.2 mm.

All 4 limbs are visualized.

Maxillary triangle and nasal bone appear normal.

Placenta is forming anteriorly. Internal OS is closed. Cervical length is 3.5 cm.

Ductus venosus show normal waveform and normal 'a' wave.

Both the uterine arteries show normal flow.

Right uterine artery PI = 0.89 and left uterine artery PI = 1.13

IMPRESSION:

- **Single Intra uterine gestational sac containing a single live fetus with gestational age of 13 weeks 1 day.**
- **EDD by USG : 05/11/2023.**
- **Nuchal translucency within normal limits.**

Suggest: Clinical correlation & follow up at around 20 weeks for anomaly scan.

Declaration by the Patient:

I Mrs. RENUKA PAWAR declare while undergoing USG I did not want to know the sex of my fetus.

SIGNATURE: _____

Declaration by the Doctor:

I Dr. SUHAS DHEKANE categorically declare that while conducting USG on Mrs. RENUKA PAWAR

I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Dr. Suhas Dhekane
(MBBS, MD (Radiodiagnosis)
Reg.No.2005/08/3303
Consulting Radiologist

Received: _____