



HAAJRA DIAGNOSTIC CENTER

C.T. SCAN... SONOGRAPHY... DIGITAL X-RAY... COLOR DOPPLER

DR. SHEeba KHAN

MBBS, MD Radiodiagnosis
Consultant Radiologist

Ex. Assistant Professor JNMC Sawangi
Ex. Radiologist Precision Scan Nagpur

Timing :
Mon. 12 noon to 6pm

Opp. Babban Galaxy Hotel, Near Shahid Bakery, Mominpura, Nagpur

Reg. No. 2880

D.O.B. 01/01/2001

Weight - 50 kg

Height - 4.11 Inch

Patient name	Mrs. ROHINI UCHIYA	Age/Sex	21Y/Female
Referred By	Dr. KUMUDINI YADAV MAM	Date	15/05/2023
LMP Date	15 FEB 2023	LMP EDD	22 NOV 2023

USG OBS – FIRST TRIMISTER ANOMALY & (TVS) NUCHAL SCAN

LMP GA: 12W 5D

USG GA: 12W 3D

OBSERVATION:

Real time B-mode ultrasonography of gravid uterus done
Single intrauterine gestation.

Fetus Survey

- **CRL – 59 mm corresponding to 12wks 3day.**
- Placenta – Developing anteriorly. [marginally low lying]
- Liquor – Normal
- Umbilical cord – 3 vessel
- Fetal activity - present
- **Cardiac activity present [FHR - 140 bpm].**
- No perigestational sac collection seen.

Aneuploidy Markers

Nasal Bone : seen

Nuchal translucency : 0.8 mm

Tricuspid regurgitation not seen .

Ductus venosus PI : 0.62

IT: seen

Fetal Anatomy

Spine normal , skull and brain appears normal ,nasal bone well seen , no major marker of aneuploidy noted.

Fetal Doppler - Ductus venosus PI: 0.62

Maternal

- Cervix measured 3.8 cm in length.
- Internal os is closed.
- **Rt uterine artery PI – 2.1**
- **Lt uterine artery PI – 2.5**
- **Mean uterine artery PI-2.3**

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IMPRESSION:

Isolated echogenic focus of size 2.1 mm in left ventricle - targeted anomaly scan is highly recommended

NT scanning is done with transabdominal as well as high resolution TVS probe

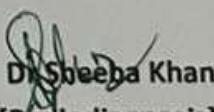
Nuchal translucency appears normal [0.8 mm]. No major sonographic marker of aneuploidy is noted in current scan

Mean uterine artery PI is more than 2 may suggest possibility of IUGR / preeclampsia in late pregnancy.

1. Single live intrauterine -pregnancy seen with CRL - 59 mm corresponding to 12wks 3day. Fetal growth is appropriate for gestational age.
2. Placenta is developing anteriorly [marginally low lying]
3. No obvious congenital anomaly seen for date.
4. Cervix measured 3.8 cm in length. Internal os is closed.

Adv- Anomaly Scan at 22 Weeks

I (DR.SHEeba KHAN) DECLARES THAT WHILE CARRYING OUT ULTRASONOGRAPHY SCANNING ON PATIENT, I HAVE NEITHER DETECTED NOR DISCLOSED THE SEX OF THE FETUS TO ANYBODY IN ANY MANNER


Dr. Sheeba Khan
MBBS MD [Radiodiagnosis]