



త్రివేణి హాస్పిటల్

TRIVENI HOSPITAL



శ్రీలంక హాస్పిటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ.

Dr. G. TRIVENI

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

Obstetrician & Gynaecologist

Infertility Specialist

Regd. No. 52814

విద్యుద సంపర్కం చేయండి
ప్రతిరోజు ఉ. గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు
ఆదివారం ఉ. గం. 10-00 నుండి పేజీ గం. 2-00 వరకు

Cell: 7569550452, 6302900950

Ph: 23981989

డా॥ జి. త్రివేణి

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

ప్రసూతి మరియు స్త్రీల వ్యాధి నిపుణులు

Regd. No. 52814

Pt's Name MRS. Ashwini w/o. Rombabu vii Kanagal Age 21 Sex F

PLAD E 4 M A E US

Wt : 57 Kgs

Temp : 97.5 F

PR : 82 nt

BP : 100/70 mmHg

Heart : SIS, (+)

Lungs : NAD

OL EG (Fem)

Afebr

PR 80 lb

PR. ut just past

FRAID
con

Date : 24/05/23

Valid Upto. 31/06/23

LMP : 9/02/23

EDD :

S.EDD :

ML :

Consanguinity Yes/No.

Menstrual Periods :

Reg/Irregular

Reg: 23981989

APU
Doublemark

DOB: 24/05/2002

Diclofenac gel
CIP

T. Trendy gel - SR
200mg
150

T. Trendy gel
150

R
1. T. Pavan PSR
150

2. T. Trendy gel
150

3. T. Trendy CC
150

4. Protein plus
powder
con

First Trimester Screening Report

Kalpana Referral Medicine and Scan Center

Protecting the Precious...

MRS ASHWINI

Date of birth : 24 August 2002, Examination date: 24 May 2023

Address: KANAGAL

Hospital no.: KFC9555

Mobile phone: 8186725725

Referring doctor: TRIVENI

Maternal / Pregnancy Characteristics:

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

Parity: 2; Deliveries at or after 37 weeks: 2.

Maternal weight: 56.0 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: 09 March 2023

EDD by dates: 14 December 2023

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 12 weeks + 6 days from CRL

EDD by scan: 30 November 2023

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	162 bpm
Crown-rump length (CRL)	65.0 mm
Nuchal translucency (NT)	1.4 mm
Biparietal diameter (BPD)	20.0 mm
Ductus Venosus PI	1.200
Placenta	anterior low
Amniotic fluid	normal

Chromosomal markers:

Nasal bone: can not examine; 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:	0.80	equivalent to 0.500 MoM
Endocervical length:	32.0 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 1090	1: 5451
Trisomy 18	1: 2677	1: 8111
Trisomy 13	1: 8393	<1: 20000
Preeclampsia before 34 weeks		1: 5885

Dr. Kalpana Reddy Screening Report

Fetal Medicine and Scan Center

Protecting the Precious...

1st trimester scan before 37 weeks

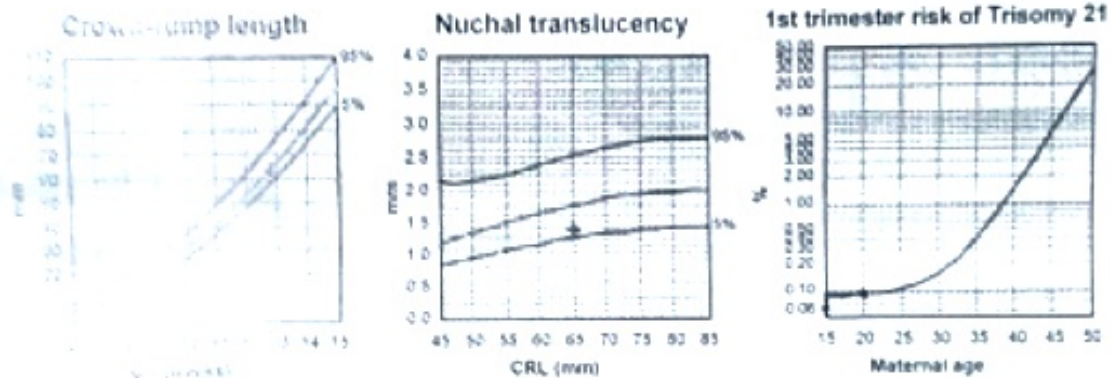
1: 388

The adjusted risk for aneuploidies is based on maternal age (20 years). The adjusted risk is the probability of screening, calculated on the basis of the background risk and ultrasound factors (nuchal translucency thickness, fetal heart rate).

Estimated risk of preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler.

Estimated double markers are corrected as necessary according to several maternal characteristics (maternal weight, BMI, 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 the research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037112). 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.fmf.ac.uk/audit).



Conclusion:

Single live intra uterine fetus corresponding to 12 weeks 6 days.

Down syndrome screen negative based on NT scan.

NASAL BONE CAN NOT EXAMINE.

Suggested DOUBLE MARKER.

Suggested 11FFA SCAN at 19 to 20 weeks. (JULY 6TH TO 10TH)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT