POOJA Rani

30/F

Height- 5.5

Weigh. 82.7.

DOB. 20/12/1992

CMP. 10/01/2023.

MH. 8/2026467/

TEST REQUISITION FORM (TRF)

SagePath®
Excellence In Health Care

Patient Details (PLEAE FILL IN CAPITAL LETTERS ONLY) :

Name : MS. POOJA RANI

Age : 30 Yrs : ___ Months ___ Days

Sex : Male ☐ Female ☑ Date of Birth : DD MM YYYY

Ph : ___

Client Details :

SPP Code SPLCG015

Customer Name RJ Pathology

Customer Contact No ___

Ref Doctor Name B. DUBEY

Ref Doctor Contact No ___

Specimen Details:

Sample Collection date :	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
quadruple MARKER	Serum	24132951

Clinical History: D.O.B. - 20/12/1992, LMP - 10/01/2023

Height. 5'5 ft, weight 82.7 KG

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.

DR. RIYA LALIT MAKHIJA
M.D. (Radio Diagnosis, Nagpur)
Consulting Radiologist
Reg. No. : C.G.M.C. 19791/2008
Scholar MD Training in Fetal Medicine

4D SONOGRAPHY, COLOUR DOPPLER ULTRASOUND AND GENETIC CLINIC

Near Agrasen Chowk, Magarpara Road, Bilaspur - 495 001 (C.G.) Ph : 07752 - 400616, Mobile : 74403 33999, 88221 18855

Patient name	Mrs. POOJA RANI	Age/Sex	30 Years / Female
Patient ID	31032319	Visit no	2
Referred by	Dr. B. DUBEY , MD	Visit date	31/05/2023
LMP date	10/01/2023, LMP EDD: 17/10/2023[20W 1D]		

OB - 2/3 Trimester Scan Report (Anomaly Scan)

Indication(s)
10 - ANOMALY SCAN
BLOOD GROUP - O+VE ,
Real time B-mode ultrasonography of gravid uterus done.
Route: Transabdominal
Single intrauterine gestation

Maternal

Cervix measured 4.90 cms in length.
Internal os is closed .
Normal mean uterine artery PI .

Right Uterine	0.33
Left Uterine	0.75 (7%)
Mean PI	0.54 (<1%)

Fetus

Survey

Presentation : Changing.
Placenta : Anterior
Lower end of placenta is reaching the internal os.
Liquor : Normal - subjective assessment
Umbilical cord : Two arteries and one vein
Fetal activity : Fetal activity present
Cardiac activity : Cardiac activity present .
Fetal heart rate - 149 bpm

Biometry(Hadlock,Mediscan, Unit: mm)

BPD	47.5, 20W 2D (58%)	Long bones	Right (mm)
HC	176, 20W 1D (43%)	Tibia	32.2, 21W 3D (84%)
AC	145.1, 19W 6D (39%)	Humerus	34.7, 21W 3D (88%)
FL	34.3, 20W 6D (58%)	Ulna	28.7, 19W 3D (21%)

EFW (grams)

FL,AC	344 (45%)

TCD : 22.4 mm (99%)

E-NATAL SEX
TERMINATION
OT DONE HERE

ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRAY SCALE SHADES, AND IT IS ALSO AFFECTED BY TECHNICAL PITFALLS, HENCE-IT IS SUGGESTED TO CO-RELATE ULTRASOUND OBSERVATION WITH CLINICAL AND OTHER INVESTIGATIVE FINDING TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO-LEGAL PURPOSE.

Mrs. POOJA RANI / 31032319 / 31/05/2023 / Visit No 2

Impression

SINGLE ALIVE GESTATION CORRESPONDING TO A GESTATIONAL AGE OF 20 WEEKS 1 DAY .

GESTATIONAL AGE ASSIGNED AS PER LMP

PRESENTATION - CHANGING

PLACENTA - ANTERIOR , LOW LYING
LOWER END OF PLACENTA IS REACHING THE INTERNAL OS.

LIQUOR - NORMAL - SUBJECTIVE ASSESSMENT

FETAL WEIGHT 344 GRAMS - 45 %ILE.

BILATERALLY PROMINENT RENAL PELVIS.

BOTH THE RENAL PELVIS SHOWS MILD FULLNESS .
THIS IS PROBABLY RELATED TO MATERNAL HORMONAL INFLUENCE .
THE POSSIBILITY OF LOWER URINARY TRACT OBSTRUCTION
APPEARS LOW CURRENTLY AS THE RENAL ECHOTEXTURE ,
BLADDER , AMNIOTIC FLUID APPEAR NORMAL AND
HYDROURETER IS NOT SEEN .
THIS FINDING WILL HAVE TO BE FOLLOWED UP AFTER 6 - 8
WEEKS TO WATCH FOR PROGRESSION IF ANY .

NORMAL MEAN UTERINE ARTERY PI .

SUGGESTED - NIPS (PREVIOUS BABY TERMINATED DUE TO TRISOMY 21)
AND FOLLOW UP USG .

Thanks for reference.

All anomalies cannot be detected in ultrasound due to certain technical limitations, obesity , certain fetal positions , fetal movements or abnormal amount of amniotic fluid . All information given today is as per the findings on scan today but does not guarantee normality of all fetal organs (structurally and functionally) in future . Also note that ultrasound permits assessment of fetal structural anatomy but not the funcition of these structures. All measurement including estimated fetal weight are subject to statistical variations

I, Dr. Mrs. Riya Lalit Makhija, declare that whille conducting USG of Mrs. POOJA , W/o- Mr. PIYUSH ,
I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

DR.MRS. RIYA LALIT MAKHIJA

Dr. Riya Makhija * M.D., Radio Diagnosis * Reg. No. CGMC-1929