

PRENATAL SCREENING REQUEST FORM

First Trimester (Dual Marker 9.0-13.6 wks) ☒ Triple and Quad Marker (14.0-22.6 wks) ☐

Patient Name : Mrs. SHIVANGI GUPTA ^{33/F} Sample collection date : 01/06/2023

Vial ID : 24126155

Date of Birth (Day/Month/Year) : 11/08/1990

Weight (Kg) : 67 Kg Height, 5'4 ft

L.M.P. (Day/Month/Year) : 03.03.2023

Gestational age by ultrasound (Weeks/days) : Date of Ultrasound : / /

Nuchal Translucency(NT) (in mm) : CRL (in mm) : BPD :

Nasal bone (Present/Absent)

Ultrasound report : First trimester ☐ Second trimester ☒

Sonographer Name : Pashmi Sharma

Diabetic status : Yes ☐ No ☒

Smoking : Yes ☐ No ☒

No. of Fetuses : Single ☒ Twins ☐

Race : Asian ☐ African ☐ Caucasian ☐ Others ☐

IVF : Yes ☐ No ☐ If Yes, Own Eggs ☐ Donor Eggs ☐

If Donor Eggs, Egg Donor birth date : / /

Previous pregnancies :

With Down Syndrome : Yes ☐ No ☐

With Neural tube Anomaly : Yes ☐ No ☐

Any other Chromosome anomaly : Yes ☐ No ☐

Signature : [Signature]

BLISS MULTI SPECIALITY CENTRE

A-23, Phase-2, Rajkishore Nagar, Bilaspur (C.G.)

Indication (S)	MRS: SHIVANGI GUPTA	AGE / SEX	33 YRS / F
REFERRED BY	DR: RASHMI SHARMA	DATE	24-05-2023
LMP	03.03.2023 (11W 5D)	USG GA	12W 5D
LMP EDD	08.12.2023	USG EDD	01.12.2023

USG ANC (NT Scan)

There is a single live intra uterine foetus with variable presentation of gestational age 12 wks 5 days.

Cardiac activity is normal. FHR 162 bpm.

Foetal spine and cranium are normal.

Placenta is seen **Forming Left Antero Lateral** (grade 0).

Amniotic fluid quantity is adequate (SDP- 3.5 cm).

Foetal parameters:

CRL (63 mm)

12 wks, 5 day

NT- 1.3 mm.

NB- seen .

Right uterine artery- PI- 1.68

Left uterine artery- PI- 1.70

Mean- 1.69

Ductal flow normal.

Cervix- The internal os is closed. Cervix measures 3.5 cm.

Fetal stomach, heart, kidney and four chamber view of the heart appears normal.

IMPRESSION:

There is a single live intra uterine foetus with variable presentation of gestational age 12 wks 5 days.

I DECLARE THAT WHILE CONDUCTING THE SONOGRAPHY OF PATIENT NAME, I HAVE NOT DISCLOSE THE SEX OF FETUS TO ANYBODY IN ANY MANNER.

DR. RASHMI SHARMA
MBBS, MD, DMRD, MRCOG, FRCOG

- THESE REPORTS ARE FOR ASSISTING DOCTORS, PHYSICIANS IN THEIR TREATMENT AND MEDICO LEGAL PURPOSE AND SHOULD BE RELATED CLINICALLY.
- NO DUPLICATE REPORTS SHALL BE ISSUED.

DECLARATION
DR. RASHMI SHARMA
MD, DMRD, MRCOG, FRCOG

Sr. Consultant O&G

Reg. No. 10000 declare that while conducting USG Scan, I have neither

I Dr. _____ detected nor disclosed the sex of her fetus to anybody in any manner.

Signature

All Congenital anomalies cannot be ruled out by USG, Some foetal congenital malformation can be masked due to position of fetus and oligohydromnious. Not for medico legal purpose. Subject to Bilaspur Jurisdiction only

Shruti Gupta

0-10

12 - 3/2/23

P120

19, 7 1/2 y 1 LRS

h

ANC-1

TCT - ve

His Ectropion

USG

Obvious
 P NR
 NG

Double
 marker test

Anomaly
 scan

15/7/23

Preg 12wks

1. ① General powder

② Dominate plus

③ Au - 9 one dly.

4) Toninorm

2 x 50

5) fca-20

6) Coarix plus / one dly
 Biotin

7) All D₂ orally

8) ProP (powder)
 100g
 milk

9) Espen 75
 w/ feed

SUNDAY CLOSED

Apollo Main Hospital, Mon to Sat. Time : 9:00 AM to 4:00 PM Ph. : 07752-433370

Apollo City Centre Mon., Wed., Fri. Time : 5:30 PM to 6:30 PM, Ph. : 07752-416300

Residence : A-8, Phase - II, Rajkishore Nagar, Mob. : 9039067494 7 to 8 AM, Labour Room : 07752-433406