

Obstetrics Report

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VYANKATESH CLINIC, KOLHAPUR

Date of Exam 08.06.2023

ET0862-23-06-08-3
SUNITA CHALKIKAR
23
Female

GraVIDa
Para
AB
Ectopic
Fetus 1

EDO(LMP) 01.11.2022 GA(LMP) 19w1d

26.01.2023 DOC
18w3d
08.11.2022

Ref. Phys.
Indication

Sonographer

Value	Range	Age	Range	GP (Williams)
229g	± 33g	18w1d		N/A

AC/BPD/FL/HC

Measurements	AUA	Value	m1	m2	m3	Mean	GP	GA
BPD (Hadlock)	✓	4.18 cm	4.18			last	29.6%	18w5d
OFD (HC)	✓	5.29 cm	5.29			last		
HC (Hadlock)	✓	14.97 cm	14.97			last	5.2%	18w5d
AC (Hadlock)	✓	12.50 cm	12.50			last	15.5%	18w1d
FL (Hadlock)	✓	2.72 cm	2.72			last	16.0%	18w2d
TH (Jeanty)	✓	2.56 cm	2.56			last	55.0%	19w1d
HL (Jeanty)	✓	2.79 cm	2.79			last	43.7%	19w0d
RLD (Jeanty)	✓	2.22 cm	2.22			last	32.4%	18w1d
Cereb (Hill)	✓	1.85 cm	1.85			last	8.1%	18w1d
CM		0.46 cm	0.46			last		
Vp		0.72 cm	0.72			last		

Measurements	Value	m1	m2	m3	m4	m5	m6	Mean
Uterus								
Cervix Length	3.15 cm	3.15						last

3D Calculations

Range

CI (BPD/OFD)	79%	(70 - 88%)
FL/AC	22%	(20 - 24%)
FL/BPD	65%	(GA: OOR)
FL/HC (Hadlock)	0.18	(0.16 - 0.19)
HC/AC (Campbell)	1.20	(1.09 - 1.26)

Limbs :

- ♦ The fetal limbs and their movements are well appreciated. Both hands and feet appear normal. No obvious congenital abnormality noted.
- ♦ The placenta is situated on the **posterior** wall and shows normal echotexture. The umbilical cord appears normal at its placental and fetal ends.
- ♦ The cervix appears normal in length (**3.1 cms**).
- ♦ The amniotic fluid is adequate.

Doppler study of uterine arteries shows normal flow pattern.

IMPRESSION :

ULTRASOUND FINDINGS REVEAL SINGLE INTRAUTERINE LIVE FETUS OF APPROXIMATELY 18 WEEKS 3 DAYS (+/- 14 DAYS) OF GESTATIONAL AGE IN CHANGING POSITION.

FETAL WEIGHT – 229 Gms

EDD – 06/11/2023

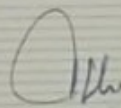
Advise: - Clinical correlation and follow up.

Please note –

- ♦ **No evidence of any obvious gross congenital abnormality noted in the present study.** (Depending on the period of the gestation, foetal position, amount of Liquor, foetal Movements and maternal abdominal wall thickness, all foetal anomalies may not be seen on USG).

DR. C. P. MEHTA
DMRD, DMRE

DR. SUNIL KUBER
MD, DMRD.



***DR. ANIL PANDIT**
DMRD.

DR. RAJENDRA MEHTA
DMRD.

DATE : 8th JUNE 2023

R.NO. C-3110-23

NAME : MRS. SUNITA VISHNU CHALKIKAR.

22 YRS / FEMALE

REF.BY : DR. NITIN PATIL.

ANOMALY SCAN

- ♦ A single live fetus in changing position is seen lying in the uterine cavity at the time of examination.

Head and Face :

- ♦ The fetal head and cranial vault appears normal. Lateral ventricles appear normal. No congenital abnormality noted.

Lateral ventricle : 7.2 mm. Cisterna magna : 4.6 mm.

- ♦ The fetal nose and lips appear normal. Alveolar ridge and mandible appears normal. No evidence of cleft lip or cleft palate noted.
- ♦ Fetal eyes appear normal. Interorbital distance is normal.

Spine :

- ♦ The fetal spine appears normal. No congenital abnormality noted.
- ♦ Three ossification centres noted.

Thorax :

- ♦ The thorax shows normal appearance with normal echogenicity of lungs.
- ♦ Heart is situated on left side, in normal axis and shows normal four chambers.
- ♦ Heart shows normal atrio-ventricular valve movements with normal interventricular septum.
- ♦ Fetal Heart rate : **153 bpm.**
- ♦ The diaphragm appears normal.


Abdomen :

- ♦ The fundic bubble is well appreciated. The liver, umbilical and portal veins are normal.
- ♦ Both kidneys & urinary bladder of the fetus are well appreciated and appear normal.

Cor

QSP-02/04

TEST REQUISITION FORM

 PathCare Diagnostics™
(A UNIT OF PATHCARE LABS PVT.LTD.)

Date of Shipment

PCC Code

Patient Name

Sargita Sambraji Mali

Gender

M

F

Age

38

Years

Months

Days

Date of Birth

Name & Address

Referring Physician

Phone # :

Kashna Lab

Sample Type / Origin

Vial ID

Specimen Collected By

Prepared By

Sample Collection Details

Date

Time

Test Name / Codes

Number of Sample Containers

Clinical Details / History

(Attach additional clinical data if any)

Last Menstrual Period (LMP)

*Mandatory for all gynaecologic specimen

Specimen Receipt Details (FOR OFFICIAL USE ONLY)

Condition of Receipt

A

R

F

Date of Receipt

☐☐☐☐