MANUSHREE IMAGING CENTRE

Dr. Mayank Ujjaliya
MD Radiodiagnosis

Ex. Consultant Radiologist
Bansal Hospital, Bhopal
Ex. SR. PGIMER Chandigarh
Ex. Consultant Star Hospital, Ahmedabad

Name:	MRS. MAYA SAINI	Age/Sex:	34 Years / Female
Ref. By:	DR. RASHMI BAJPAI	Date:	03/07/2023

USG OBSTETRICS NTNB/EARLY ANOMALY SCAN

LMP- 08.04.2023 **GA LMP- 12w2d.**

Findings:

Single intrauterine gestation seen.

Changing lie and presentation.

Placenta –Fundo-Anterior.

CRL- 64 mm corresponding to 12w6d.

Fetal heart rate 169 b/min.

Internal os is closed.

First trimester anomaly scan

Nasal bone – present

Nuchal translucency (NT) measures – 1.1 mm (normal).

Normal ductus venosus waveform with positive 'a' wave.

Right uterine artery PI-1.66. Left uterine artery PI-1.45. Mean PI-1.55 (45th centile-normal).

IMPRESSION:Ultrasound findings are suggestive of single live intra-uterine pregnancy. The approximate gestational age is around 12w6d.

EDD by USG-09.01.2024

I, Dr.Mayank Ujjaliya, MD declare that while conducting USG, I have neither declared nor disclosed the sex of her fetus to anybody in any manner.

DR. MAYANK UJJALIYA
MD (MP-16150)

Shop No. 4 CI Square, Kolar Road, Bhopal
Ph.: 0755-3597661, 9303614620

Timing : 9:00 am to 9:00 pm

TEST REQUISITION FORM (TRF)

05/07/2023

SagePath
Excellence in Health Care

Patient Details (PLEAE FILL IN CAPITAL LETTERS ONLY) :

Name : Mrs. Maya Saini

Age : 34 Yrs : ___ Months ___ Days

Sex : Male ☐ Female ☐ Date of Birth : ☐☐ ☐☐ ☐☐☐☐

Ph : _____

Client Details :

SPP Code SPL0115

Customer Name [illegible]

Customer Contact No _____

Ref Doctor Name _____

Ref Doctor Contact No _____

Specimen Details:

Sample Collection date :	Specimen Temperature :				
Sample Collection Time : AM / PM		Sent	Frozen (<-20°C) ☐	Refrigerator (2-8°C) ☐	Ambient(18-22°C) ☐
		Received	Frozen (<-20°C) ☐	Refrigerator(2-8°C) ☐	Ambient (18-22°C) ☐

Test Name / Test Code	Sample Type	SPL Barcode No
Double marker Date of Bioth -30/06/1989 Height 5.8 inch weight 70 kg	Serum	24392083

Clinical History:

No. of Samples Received:

Received by:

Note: 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.