



TEST REQUISITION FORM (TRF)



Patient Details (PLEASE FILL IN CAPITAL LETTERS ONLY):

Name : Mrs. TANYA SHARMA

Age : 33 Yrs : Months Days

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

Ph :

Client Details :

SPP Code SPLC0020

Customer Name m.s.p. pathwells

Customer Contact No

Ref Doctor Name B. dubey M.D.

Ref Doctor Contact No

Specimen Details:

Sample Collection date :	Specimen Temperature :	Sent	Frozen (<-20°C) <input type="checkbox"/>	Refrigerator (2-8°C) <input type="checkbox"/>	Ambient (18-22°C) <input type="checkbox"/>
Sample Collection Time : <u> </u> AM / PM		Received	Frozen (<-20°C) <input type="checkbox"/>	Refrigerator (2-8°C) <input type="checkbox"/>	Ambient (18-22°C) <input type="checkbox"/>

Test Name / Test Code	Sample Type	SPL Barcode No
<u>Dual test</u>	<u>Serum</u>	<u>24136523</u>
<u>TSH</u>		
<u>Height - 5.1</u>		
<u>weight - 61 kg</u>		
<u>DOB - 7/11/1990</u>		

Clinical History:

No. of Samples Received:

Received by: [Signature]

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.

Ultrasound report : First trimester ☒ Second trimester ☐

Sonographer Name :

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. TANYA SHARMA Sample collection date : 38/12

22/07/2023

Vial ID : 24136823.

Date of Birth (Day/Month/Year) : 07/11/1970.

Weight (Kg) : 67 kg.

L.M.P. (Day/Month/Year) : 10/05/2023.

Gestational age by ultrasound (Weeks/days) : 41 Date of Ultrasound : 17/06/2023.

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

Nasal bone (Present/Absent)

Ultrasound report : First trimester ☒ Second trimester ☐

Sonographer Name : _____

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 : 

Makhija

Imaging Point



DR. RIYA LALIT MAKHIJA

M.D. (Radio Diagnosis, Nagpur)

Consulting Radiologist

Reg. No. : C.G.M.C. 1929/2008

Scholar MD Training in Fetal Medicine

4D SONOGRAPHY, COLOUR DOPPLER ULTRASOUND AND INTERVENTIONAL GENETIC CLINIC

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

NAME : MRS. TANYA SHARMA, 33 Yrs./F
REF. BY : Dr. (MRS) B. DUBEY M.D. (O&G)

DATE : 29 Jun 2023

SONOGRAPHY OF PELVIS (TAS)

INDICATION NO - 1, 17

G3 L1 A1

FIRST - ALIVE 6 YEARS/M
SECOND - FIRST TRIMESTER ABORTION
THIRD - PRESENT PREGNANCY

LMP : 10.05.2023

EDD : 14.02.2024

Ges Age : 7 weeks 1 day.

Uterus is anteverted .

Single well defined gestational sac seen in uterus.
Its size and shape is regular. E/o good vascularity seen around the gestational sac.
Secondary yolk sac and Embryo seen.

CRL : 1.46 cm = 7 weeks 6 days.

USG GUIDED EDD : 09.02.2024

Embryonic cardiac activity seen. FHR : 172 bpm.

Cervix appears normal. Internal os is closed.

No mass lesion seen in either adenexa.

OPINION : **EARLY SINGLE ALIVE INTRAUTERINE PREGNANCY OF 7 WEEKS 6 DAYS MATURITY (ASSIGNED AS PER BIOMETRY).**

SUGGESTED: **DOUBLE MARKER TEST AND FOLLOW UP USG AT 11 - 13.6 WKS FOR NT SCAN.**

Thanks for reference.

All measurements including estimated foetal weight, are subject to statistical variations.
Not all anomalies can be detected on sonography.

I, Dr. Mrs. Riya Lalit Makhija, declare that while conducting USG of Mrs. TANYA, W/o Mr. NITESH, I have neither detected nor disclosed the sex of her fetus to any body in any manner.

Dr. Mrs. Riya Lalit Makhija



PRE-NATAL SEX DETERMINATION IS NOT 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.