

Dr. Satish J. Shrivastava  
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Dr. (Mrs.) Shyama Shrivastava  
M.B.B.S.,  
Ex. Senior Resident Surgeon Gynae & Obst.  
Medical College, Burdwan  
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Resi. & Clinic : Jawahar Chowk, Sadar, Nagpur.

25/7/23

Name - Smt Aneliye Ali.

Date of birth - 26/4/96.

Mobile No. - 8329671418

Add - Lai Naya Nea Pore House Nag

Husband's Name - MR Jared Ali

LMP - 24<sup>th</sup> April 23

USG - on 24/7/23 13 weeks NT Scan

Height - 155 cm

Weight - 56.1 kg

Bp - 110/70

H/o - Diabetes & Bp in ~~both parents~~  
Diabetes Mellitus

No H/o tobacco / Smoking / Allergy.

Pt on Dyprene 50

SLW B Sujan  
Dual Marker  
Urini - Rutes 



Time : 10 am to 3 pm  
6 pm to 9 pm

# Global Diagnostics

## Sonography & Digital X Ray

### Dr. Shoaib (Soyaf) Fazlani

MBBS, (GMC Nagpur), MD - Radiology (Mumbai), DNB (Diplomate of National Board New Delhi)  
Ex. Consultant Radiologist at Midas Hospital, Ramdaspath, Nagpur., Ex. Asst. Prof. Govt. Medical College, Nagpur  
Reg. No. 2014/07/3296

Shop No. G 7, Ground Floor, Anjuman Complex, Opp. Sadar Busstand, Chaoni Road, Nagpur. Contact No. : 7083750761

Patient Name: ARSHIYA ALI

Date: 24/07/2023

Ref Phy: DR. SATISH SHRIVASTAV MBBS MS

Age/Sex: 27 Years / FEMALE

#### OBSTETRIC NT SCAN

LMP:23-04-2023	▼GA(LMP):13w1d	▲ AUA:13w5d	EDD by LMP:28-01-2024
0	5	10	20 25 30 35 40

Dating	LMP	GA	EDD
		Weeks	Days
By LMP	LMP: 23/04/2023	13	1
By USG		13	5
AGREED DATING IS (BASED ON LMP)			

Real time USG of pelvis shows a gravid uterus with a single intra uterine gestational sac.

#### FETAL SURVEY

Placenta developing anterior.

There is no evidence of subchorionic hemorrhage

Liquor –Normal the fetal pole and fetal activity are well appreciated.

Cervical length measures 3.5 cm. The internal OS is closed.

#### Fetal biometry

	mm	weeks	days
Crown Rump Length	66.7	13	0
Biparietal Diameter	24.5	14	1
Head Circumference	86.5	13	6
Abdominal Circumference	66.9	13	2
Femoral Length	11.2	13	2
Heart Rate	154 Beats Per Minute.		
The Embryo attains 40 weeks of age on	24/01/2024		
Nuchal Translucency	1.6 mm 39%	+ + +	
Nasal Bone	3.1 mm 42.1%	+ + +	
Ductus Venosus Waveform	Normal waveform Pattern		

#### FETAL STRUCTURES VISUALIZED

**HEAD / FACE / SPINE:** The falx is well visualized and is in the midline. The IT is well visualized and is normal. The spine is seen as 2 lines at this stage. Both orbits are same. Retronasal triangle shows presence of nasal bones and normal mandibular gap. Frontomaxillary angle is normal.

**THORAX:** The heart is central in the thoracic cavity. Four chamber heart show equal size inflows. Presence of V sign (connection of ductal arch and aortic arch) is noted on color Doppler in 3 vessel tracheal view.

**ABDOMEN:** The cord insertion in the anterior abdominal wall is well seen. The stomach is noted in the abdomen. Urinary bladder is visualized. Two umbilical arteries seen.

**EXTREMITIES:** Visualized upper limbs and lower limbs are normal bilaterally.

#### UTERINE ARTERY SCREENING DOPPLER



# Global Diagnostics

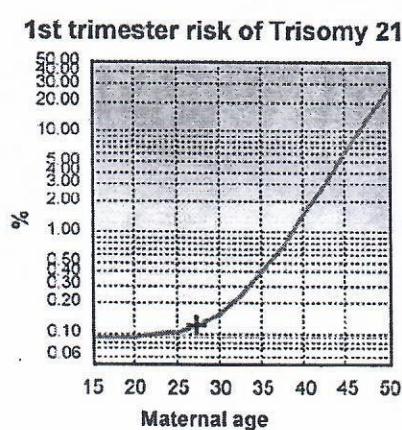
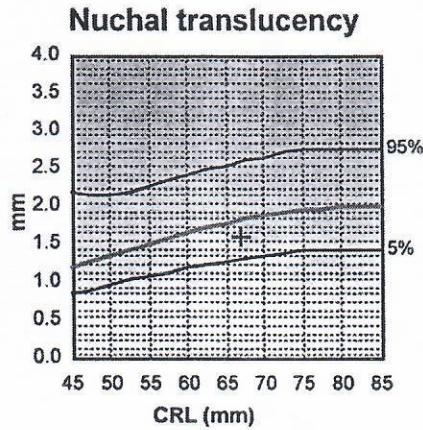
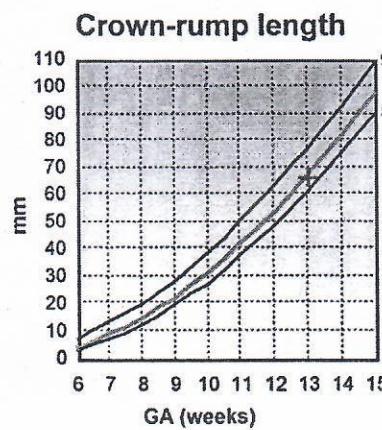
## Sonography & Digital X Ray

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Vessels	S/D	RI	PI	PI Percentile	Remarks
Right Uterine Artery	2.38	0.58	0.96	2.8% ← + + +	No early Diastolic notch seen
Left Uterine Artery	3.08	0.68	1.39	28.8% + • + +	No early Diastolic notch seen
Mean Uterine Artery			1.175	12% + • + +	Normal



First trimester: Pre Ultrasound Maternal age risk for Trisomy21 is 1 in 461

T21 Risk	
From – NT	1 in 4882

**IMPRESSION:**

- Early single live intra uterine gestation of 13 week's 5 days- gestational age assigns as per biometry . Fetus is appropriate for gestational age. (expected by LMP13 weeks1 days )
- Nuchal translucency is normal
- No gross congenital anomaly seen at this stage
- Placenta is developing anteriorly. Liquor – Normal
- Cervix measuring 3.5 cm , the internal os is closed

Suggested dual marker correlation and anomaly scan at 18-20 weeks

**PLEASE NOTE:** 1) this is machine depended that to image oriented investigation. Hence many things can influence appearance and interpretation of image. 2) In case of disparity between report and clinical evaluation second opinion is advisable before commencing the final treatment. 3) This document is not for medicolegal purpose

I, Dr. SHOAIB A. FAZLANI declare that while conducting ultrasonography on this patient, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

  
**DR. SHOAIB A FAZLANI**  
 MD - RADIODIAGNOSIS (MUMBAI)  
 DNB - RADIODIAGNOSIS (DELHI)  
 CONSULTANT RADIOLOGIST

**Soyaf**  
 (Radiology)  
 2006