

CRYSTAL DIAGNOSTICS CENTRE

Uma Complex, Hajo Road
Nalbari : 781335

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Patient Id : CE/130577

Name : LALITA BARMAN

Case No : L/6169

Ref By : Dr. P.TAMULI

Age: 27 Y Sex : Female

Case Date : 05/08/2023

Report Date : 07/08/2023

(USG DONE IN VOLUSON E8 RADIANCE BT18)

NT SCAN

REPORT: LMP=08/05/2023 GA=13 W 1 D EDD by LMP= 12/02/2024

FETUS- : Single intrauterine live fetus seen in Variable lie presentation.

TAS/TVS with VOLUSON E8		GESTATIONAL AGE
Fetal heart action present	161 bpm	Regular rythm
Crown- rump length (CRL)	6.83 cm	13 w 1 d
Nuchal translucency (NT)	1.7 mm	
Nasal bone	Present	

EDD = 12/02/2024 (As per LMP)

Fetal anatomy :

Skull /brain appears normal , 4-ch view of heart is normal , outflow tracts seen, spine appears normal , abdomen appears normal , stomach visible , kidneys normal , urinary bladder seen, 3 bones of both upper & lower limbs seen

Placenta	Anterior
Amniotic fluid	Normal

PTG→

Dr. Dipika Morang, MD
Consultant Radiologist

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CERVIX : Cervical length is 5.26 cm . Os is closed.

DOPPLER : Ductus venosus shows normal flow patterns . No reversal of 'a' wave seen.

- Ductus venosus PI = 0.78
- Right uterine artery PI = 1.29
- Left uterine artery PI = 1.67
- Mean uterine artery PI = 1.48 (normal)

OVARIES: Ovaries are seen & appear normal in size
Multiple small follicles seen in both ovaries arranged peripherally. Both ovaries show central echogenic stroma.
No adnexal mass seen.
No collection in the POD.

IMPRESSION: SINGLE LIVE FETUS AT 13 WEEKS 1 DAYS OF GESTATIONAL AGE IN VARIABLE LIE
(GESTATIONAL AGE ASSIGNED AS PER LMP)
-POLYCYSTIC OVARIAN MORPHOLOGY

Advice — Rescan at 20 weeks.

NB—The above descriptions are based on sonologic interpretation & should be correlated with clinical findings and ancillary procedures.

(Limitation of USG scanning—)

while USG can provide very valuable information about pregnancies & can detect many abnormalities in fetus ,it cannot give a definite answer to every problem on every occasion .USG cannot guarantee that a baby will be normal in every detail . Scanning conditions may be suboptimal due to various constraints including obesity, abdominal scars & inappropriate fetal position).

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