

¹³C
tric
p-4
nm

TSN

[illegible]

for TCS Thyrotoxic Periodic paralysis
o TCS Esopirin 25 mg od

2 - Sp. Hemper 14y Boy

2ndy calibond 14th Ry

Plans against the B. J. Smith

for
up

04 SEP 2023

BP-101160

Pulse - 111 bpm

SP02 - 99%

wt -51.24g

अकिता विजयवर्गीय

बी. बी. एस., डी. एम. आर. डी

आर. आई. फेलोशिप :

वटी हॉस्पिटल, मुंबई

ता हॉस्पिटल, मुंबई

डिबोलाजिस्ट :

स हॉस्पिटल, नोएडा

टी. बी. हॉस्पिटल, दिल्ली

री हॉस्पिटल लिमिटेड, कानपुर

र लाल नेहरू कैंसर हॉस्पिटल, भोपाल

PATIENT'S NAME : MRS. MINAKSHI

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

MRI FELLOWSHIPS :

• NANAVATI HOSPITAL, MUMBAI

• HINDUJA HOSPITAL, MUMBAI

FORMER RADIOLOGIST AT:

• FORTIS HOSPITAL, NOIDA

• G.T.B HOSPITAL, DELHI

• REGENCY HOSPITAL LTD, KANPUR

• JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

FMF Certified from

Fetal Medicine Foundation

Reg. No. MP-8932

AGE/SEX : 28Y/F

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS)

DATE : 01.09.2023

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 12.05.2023

GA(LMP):14wk 4d

EDD : 16.02.2024

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 169 beats /min.
- PLACENTA: is grade I, posterior & not low lying.
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR .
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 2.6 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 0.84)

FETAL GROWTH PARAMETERS

CRL	72.3	mm	~	13	wks	3	days of gestation.
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- Estimated gestational age is 13 weeks 3 days (+/- 1 week). EDD by USG : 05.03.2024
- Internal os closed. Cervical length is WNL (34.0 mm).
- Baseline screening of both uterine arteries was done with mean PI ~ 1.31 (WNL for gestation).

IMPRESSION:

- Single, live, intrauterine fetus of 13 weeks 3 days +/- 1 week- Small for date? mistaken dates/ delayed conception ?? cause.
- Gross fetal morphology is within normal limits.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

(DR. ANKITA VIJAYVARGIYA)

18/13/23
18/13/23
18/13/23
18/13/23

First Trimester Screening Report

Pandey Minakshi

Date of birth : 15 November 1995, Examination date: 01 September 2023

Address: hno. 41/2 a rajharsh colony
kolar road
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0.

Maternal weight: 49.0 kg; Height: 157.5 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 12 May 2023

EDD by dates: 16 February 2024

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 13 weeks + 2 days from CRL

EDD by scan: 06 March 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	169 bpm
Crown-rump length (CRL)	72.3 mm
Nuchal translucency (NT)	2.6 mm
Ductus Venosus PI	0.840
Placenta	posterior high
Amniotic fluid	normal
Cord	3 vessels

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.31	equivalent to 0.830 MoM
Mean Arterial Pressure:	76.5 mmHg	equivalent to 0.950 MoM
Endocervical length:	34.0 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 833	1: 16663
Trisomy 18	1: 2115	<1: 20000
Trisomy 13	1: 6611	1: 9975
Preeclampsia before 34 weeks		1: 3069

First Trimester Screening Report

Fetal growth restriction before 37 weeks

1: 182

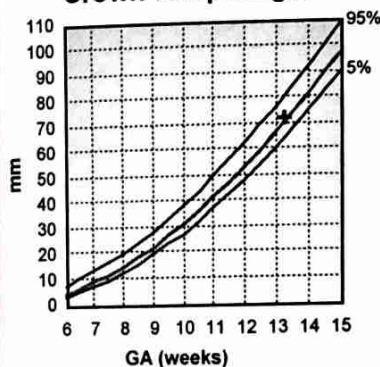
The background risk for aneuploidies is based on maternal age (27 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, tricuspid Doppler, ductus venosus Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

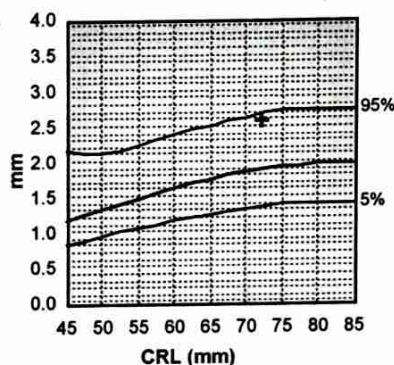
All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).

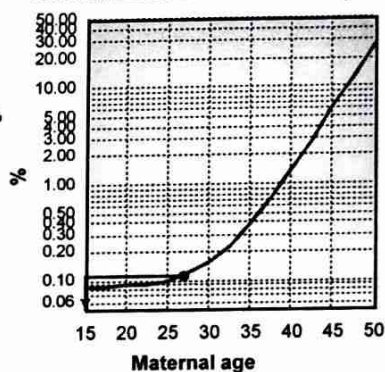
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Dr. Pooja Shrivastava

MBBS

MS (Obstetrics & Gynaecology)

Reg No. MP-4298

Trained in : Gynaecological Endoscopy Laparoscopy & Hysteroscopy. Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning



- Ex. Resident Gynaecologist MY Hospital Indore
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

Obstetrician & Gynaecologist

Consultation fee valid for 3 visits/15 days whichever is earlier in routine
Office hours only (Monday to Saturday)



Name : MRS. MINAKSHI PANDEY

Age/Sex : 28 Years / Female

LH-A-008762

Address : 41/2A Rajharsh Colony Kolar Road

Mobile No.: 9755208895

Date : 22-Aug-2023

BP 103/64

Pulse 108/min

Temp 98.6°F

Wt 49.4 kg

Adv
Obstetric
NT, NB a
scan a
24/8/23
31/8/23

R

For Doppler - for non
For Nuchal translucency 20w 18
For Thyroid scan 50w 10w
For ECG 50w 10w

✓
Rus
Bypa

10d

Signature

Emergency Call : 9425005377

Email id : poojadr2003@gmail.com

LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal

Ph.: 0755-4093322, 6262093322 8085441332



भारत सरकार

Government of India



मीनाक्षी

Minakshi

जन्म तिथि/DOB: 15/11/1995

महिला/ FEMALE

7831 6758 2938

VID : 9119 1186 8262 4501

मेरा आधार, मेरी पहचान