

1 SEP 2023

John  
osprey chick 2024 terminal May 2024  
number → TAD Namusjat Hwy  
BSN → TAD Ryerson Hwy May 2024  
o TAD Esquimau Hwy May 2024  
2nd Hump Hwy Roy  
2nd Calabowood Hwy Roy  
1st Hans Margaret Hwy Roy  
3rd  
Bry  
yuk

BP-101160  
Pulse-116bpm  
SpO2-99%  
wt -51.2kg

4 SEP 2023

# अंकिता विजयवर्गीय

बी. बी. एस., डी. एम. आर. डी

आर. आई. फेलोशिप :

बीटी हॉस्पिटल, मुंबई

ना हॉस्पिटल, मुंबई

डियोलाजिस्ट :

स हॉस्पिटल, नोएडा

सी. बी. हॉस्पिटल, दिल्ली

सी 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

FMF Certified from

Fetal Medicine Foundation

Reg. No. MP-8932

## FORMER RADIOLOGIST AT:

- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

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.

▪ 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 ).

### PRESSION:

- 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 echogenicity. 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 )

19 13/9  
13/4 13/5  
MS-13/6

# 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;

EDD by dates: 16 February 2024

Last period: 12 May 2023

## First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

EDD by scan: 06 March 2024

Gestational age: 13 weeks + 2 days from CRL

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

Page 1 of 2 printed on 01 September 2023 - Pandey Minakshi examined on 01 September 2023.

# First Trimester Screening Report

Fetal growth restriction before 37 weeks

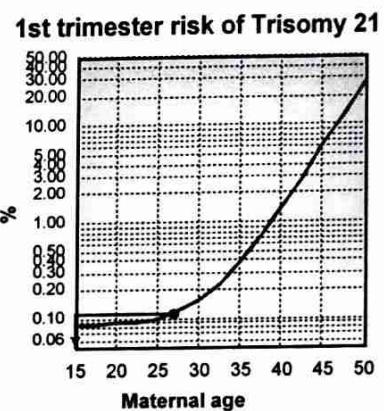
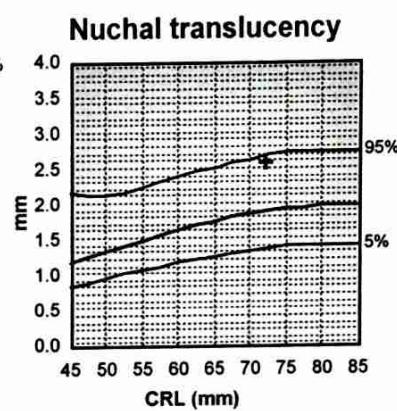
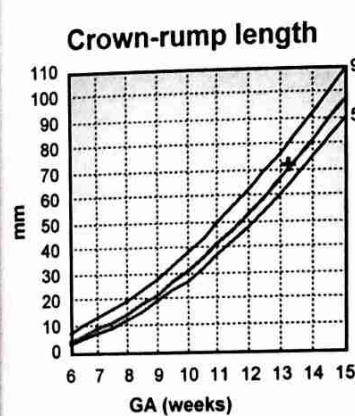
1: 182

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](http://www.fetalmedicine.com)).



# 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  
10 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

14/07/23

Adm  
Obstetrics  
PT, NB  
Scan  
Date 02/08/23  
31/8/23

R

PT Dokantri - 200 mm 7  
PT Nautiyal 420 mm 18  
PT Thyro 50 mm 24  
PT Ectopic 85 mm 24

✓ Pw's  
breast

10 d

Signature

Call : 9425005377

Email id : poojadr2003@gmail.com



LOTUS HOSPITAL

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

Ph.: 0755-4093322, 6262090022 8085441332



Government of India  
भारत सरकार



मीनाक्षी

Minakshi

जन्म तिथि/DOB: 15/11/1995  
महिला/ FEMALE

7831 6758 2938

VID : 9119 1186 8262 4501

मेरा आधार, मेरी पहचान