త్రివేణి హాస్పిటల్
TRIVENI HOSPITAL

గ్రీన్‌లాండ్ హాస్పటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ.

Dr. G. TRIVENI
M.B.B.S., M.S.(Obgy.)
Obstetrician & Gynaecologist
Infertility Specialist
Regd. No. 52814

సంప్రదించు వేళలు
ప్రతిరోజు ఉ. గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు
ఆదివారం ఉ. గం. 10-00 నుండి మ. గం. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి
M.B.B.S., M.S.(Obgy.)
ప్రసూతి మరియు స్త్రీల వ్యాధి నిపుణులు
Regd. No. 52814

Bo: 24441333

Pt.'s Name Mrs Rajeshwari w/o Eshwar Vil. Nalgonda Age 23 Sex F

GPLAD c̄ 3MA c̄ ? Bicornuate

Date: 23/08/2023

Valid Upto. 06/09/2023

Wt : 44kgs

Tmp : (N)

PR : 82m1

BP : 110/70mmHg

Heart : S_1S_2 (+)

Lungs : NAD

DOB: 01-11-1999

Bo 24441333

c/o Giddiness
Nausea

O/E GC: Fair
Afeb

PR PO/S/A
Nausea

Pruritus Belly

LMP : 11/06/24

EDD : 16/3/24

S.EDD : 17/3/24

ML :

Consanguinity Yes/No.

Menstrual Periods : Reg/Irregular

a+ve

TSH (N)

R

1. T. Allogest SR 200
1 — 1 15

2. T. Pan D
1 — 15d

3. T. Foline
— 1 15d

4. PC Protpowder
CM

5. T. Dydrogold
1 — 1 15d

3/9/23
NT + DM

T. Ecosprin 150mg
1

T. Vomikind
1 — 15d

Bar: 2444/333

Kalpana Fetal Medicine and Scan Center

Protecting the Previous...

First Trimester Screening Report

MRS RAJESHWARI

Date of birth : 01 November 1999, Examination date: 06 September 2023

Address: NALGONDA Hospital no.: KFC10753

Mobile phone: 7780210555

Referring doctor: TRIVENI

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).
Parity: 0.
Maternal weight: 45.0 kg; Height: 152.0 cm.
Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Patient's mother had preeclampsia: no.
Method of conception: Spontaneous;
Last period: 11 June 2023 **EDD by dates: 17 March 2024**

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.
Gestational age: **12 weeks + 3 days** from dates **EDD by scan: 17 March 2024**

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	145 bpm
Crown-rump length (CRL)	61.0 mm
Nuchal translucency (NT)	1.3 mm
Biparietal diameter (BPD)	17.0 mm
Ductus Venosus PI	1.300
Placenta	RIGHT LATERAL ANTERIOR POSTERIOR
Amniotic fluid	normal

Chromosomal markers:
Nasal bone: present; Tricuspid Doppler: normal.
Fetal anatomy:
Skull/brain: appears normal; Spine: appears normal; Heart: Appears normal; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.95	equivalent to 1.150 MoM
Endocervical length:	31.0 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	*Background risk*	*Adjusted risk*
Trisomy 21	1: 1006	1: 17447
Trisomy 18	1: 2424	1: 12326
Trisomy 13	1: 7612	<1: 20000

#8-2-71/1/ఎ, గ్రీన్‌లాండ్ హాస్పిటల్ ఎదురుగా, బ్యాక్ సైడ్, నల్గొండ - 508 001. తెలంగాణ
For Appointment : ✆ +91 8522 856 854 | +91 9704 234 016

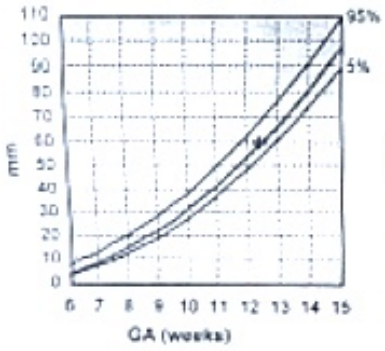
Preeclampsia before 34 weeks	1: 280
Fetal growth restriction before 37 weeks	**1: 77**

The background risk for aneuploidies is based on maternal age (23 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, fetal heart rate).

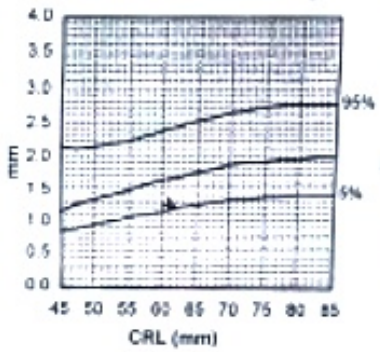
Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler. The adjusted risk for PE < 34 weeks or the adjusted risk for FGR < 37 weeks is in the top 10% of the population. The patient may benefit from the prophylactic use of aspirin.
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).

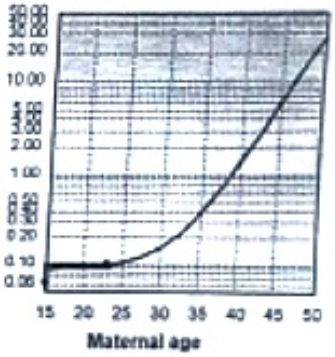
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Comments

Single live intra uterine fetus corresponding to 12 weeks 3 days.

Down syndrome screen negative based on NT scan.

Uterine doppler shows high resistance flow.Suggested to Tab Asprin upto 36 weeks.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (OCT 24TH TO 27TH)

I,Dr.L.Kalpana reddy,declared that while conducting ultrasonography / imaging scanning on Mrs.RAJESHWARI,I have neither detected nor disclosed the sex of fetus to any body in any manner.

DR.L.KALPANA REDDY
FETAL MEDICINE CONSULTANT

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