



Anomaly Scan

Pooja Londhe

Date of birth: 04 December 1995

Referring doctor: Dr. Kokare

Examination date: 30 August 2023

Patient id: 688

Maternal Blood Group: A; Rhesus: positive; Maternal weight: 56.8 kg; Height: 160.0 cm; BMI: 22.2;

last period 12 April 2023 - Cycle: regular - LMP sure

Conception: spontaneous

Gestational age

LMP 20 weeks + 0 day(s)

US 20 weeks + 0 day(s)

EDD

17 January 2024

17 January 2024

Obstetric History Gravida: 1. Para: 0.

Family history: Consanguinity: no;

Indication

Routine, Anomaly scan

USS FINDINGS Number of fetuses: 1
transabdominal scan, View: good.

Fetal heart activity visualised

FHR 146 bpm

Fetal movements normal

Presentation cephalic

Placenta posterior high

Placenta grade Grannum 0

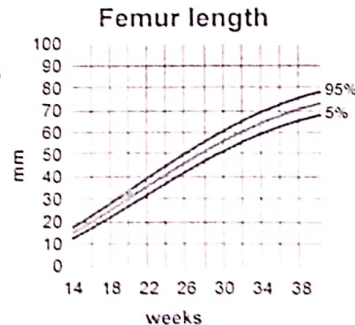
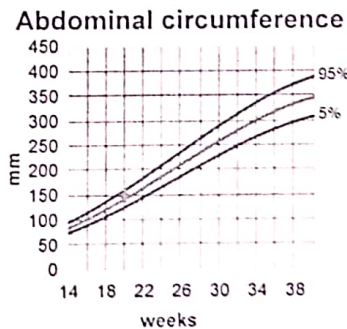
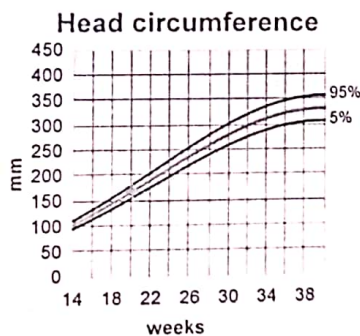
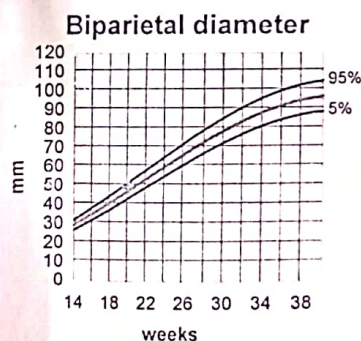
Amniotic fluid normal

EFW 335 g

Cord 3 vessels

Examination Date BPD
30 August 2023 49.4HC
170.7FL
32.5AC
149.4

CRL

Gestation
20 w + 0 dTranscerebellar Diameter (TCD): 20.0 mm
Nuchal Fold: 3.8 mm
Renal Pelvis Right: 1.3 mmCisterna Magna (CM): 4.8 mm
Prenasal Thickness: 3.8 mm
Renal Pelvis Left: 1.2 mmVentricular Atrium: 6.3 mm
Nasal Bone: 5.7 mm
Humerus: 30.2 mm

FETAL ANATOMY

HEAD: Normal
SPINE: Normal
HEART: NormalBRAIN: Normal
FACE: Normal
ABDOMINAL WALL: NormalNECK: Normal
THORAX: Normal
GIT: Normal

URINARY TRACT:

Normal

EXTREMITIES:

Normal

UTERINE ARTERY DOPPLER: Mean PI 1.370, no notch

CERVICAL ASSESSMENT

Cervix length 34.0 mm

Funnelling no

Cervical Comment: normal cervical length

Doppler ultrasound

Uterine artery

PI left 1.200

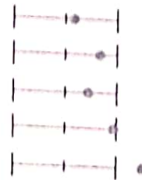
PI right 1.540

Mean PI 1.370

RI left 0.64

RI right 0.73

Notch no notch



Cervical assessment

Cervix length 34.0 mm

Funnelling no

Comment normal cervical length

Conclusions

Diagnosis No obvious fetal defects

normal uterine artery Doppler and cervical length

Conclusion routine scan adequate assessment

Comments

Fetal growth and amniotic fluid are normal. There are no obvious structural defects or significant markers for chromosomal abnormalities. Fetal cardia shows a normally connected heart with no obvious defects and normal flow patterns.

The placenta is on the posterior wall of the uterus, the lower edge of the placenta is well away from the internal os.

The cervix measures 34 mm with no evidence of funneling. The uterine artery Doppler is normal for this gestation.

As the mother has not had any FT risk assessment with serum biochemistry there is option of second trimester Quadrapl
Please note for all your future visits to ANY SCAN CENTRE, it is mandatory by the GOI to produce prior to the scan test

1. Photocopy(xerox) of Government approved photo ID card of the prospective mother (Aadhaar card, passport, voter ID, driving license etc)

2. Referral letter from your Doctor with Indication for the scan and her/ his SEAL and SIGNATURE

Also, please keep extra time to fill the detailed GOI-mandated "F Form" before the scan which needs to be submitted online prior to the scan.

Please note:

1. All anomalies cannot be ruled out on ultrasound due to technical limitations, maternal factors like amount of liquor, maternal habitus, previous scar, advanced gestational age etc. and fetal conditions like multiple pregnancies, fetal positions, late appearance of few anomalies etc.

2. Absence of anomaly on ultrasound scan does not absolutely rule out the possibility of having one.

3. For detail evaluation of fetal heart, advanced fetal echocardiography is required.

