

Mrs. Sonam Jai

30/f

DOB - 29/9/1991

W - 60 kg

H - 5.3 f

Diagnosable Spam put



DEPARTMENT OF RADIO DIAGNOSIS
ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL
Saket Nagar, Bhopal M P India - 462 020

ULTRASONOGRAPHY REPORT
OBSTETRICS

Patient's Name: SONAM JAIN

Age: 30/2

Date: 14/09/2023

OPD Registration No: 239212300393768

Referred By:

USG No.:

LMP - GA by LMP - 19/04/2023 21W 1D : EDD by LMP - 21/01/2024

Number of fetuses - single

Fetal Position - vertex

Fetal Heart - (+) / Heart Rate 164 bpm

Placenta Position - Anterior

Amniotic fluid - Adequate

Fetal Biometry - All measurements are in cms.

BPD = 22W 3D (5.35 cm)

FL = 21W 1D (3.72 cm)

HC = 22W 3D (20.22 cm)

AC = 21W 1D (15.98 cm)

Effective gestational age by USG = 22W 0D

Fetal Weight = 4.33 ± 0.64 g

Screening of Body Parts:

HEAD:

Skull - Normal / dolicocephalic

Nuchal fold thickness - mm

Orbital diameter - 11.1 mm

Inter orbital distance - 11.4 mm

Palate, Lips & Nose appear normal



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Brain - Cerebellar diameter (TS) - 20.9 mm
Cisterna magna - 4 mm
Atria of lateral ventricle - 6.4 mm
All the above measurements are within normal limits.

Fetal Spine : Appears normal. (Parallielism of anterior and posterior laminae is well maintained)

Chest: - Bilateral Lung appear normal in morphology and parenchymal echogenicity.
Diaphragm appears normal

Heart: 4 chambers views suggest normal sizes of all cardiac chambers

- Normal situs
- Normal outflow tracts

Abdomen: - Cord insertion - Normal
- 3 Vessel cord is noted

Stomach: Bubble well visualized, normal in position.

Normal distribution, diameter and echogenicity of bowel loops.

Kidney: Bilateral kidneys are normal in size and echogenicity.

No evidence of hydronephrosis.

Urinary Bladder: appears normal.

Limbs: Humerus length: 33.1 mm
Tibial length: 32.5 mm
Foot length: 35.7 mm

Above screening suggest absence of any apparent congenital anomaly.

IMPRESSION: Single live intrauterine gestation of BGA-226000

DECLARATION

I, Dr. Nishesh declare that while performing sonography/ Image scanning of Sonam I have neither detected nor disclosed sex of the fetus to her or anybody in any manner.
(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 and tissue echogenicity. Therefore all fetal anomalies may not necessarily be detected at every examination. Patient has been counseled about the capabilities and limitations of this examination)

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SONOLOGIST: