



ARUNODAYA DIAGNOSTIC CENTRE

Sitharamanjaneya Theatre Beside Lane,
Shivaji Nagar, SIDDIPET - 502 103
Tel : 99513 22200, 08457 293200

Patient Name : Mrs.ANJALI W/O BAL RAJU

Patient Id : 273063

Age / Sex : 24 Years / FEMALE

Reg Date : 16/09/2023

Referred By : Dr.VANDANA MBBS DGO

Report Date : 16/09/2023 13:04:14

ULTRA SOUND SCAN OF GRAVID UTERUS - EARLY TIFFA / NT SCAN

Uterus gravid with gestational sac and single live fetus.

CRL : 72.86 mm corresponding to 13 weeks 3 days. EDD : 20/03/2024

Cardiac pulsations seen. HR 145 BPM. Movements good

Nuchal translucency normal (1.6 mm).

Nasal bone madeout. Intra cranial translucency appears normal

Fetal stomach visualised and cardiac situs appears normal

Tricuspid wave form appears normal

Ductus venosus wave form appears normal

Fetal urinary bladder visualised

Fetal abdominal wall appears normal

Early spine structure appears normal

Imaged extent extremities appears normal.

Placenta : Anterior, lower margin reaching upto internal Os grade 0 Maturity

Bilateral uterine artery wave form appears normal.

Cervical length 37 mm. Internal os closed

INTERPRETATION :

- INTRAUTERINE PREGNANCY WITH SINGLE LIVE FETUS OF 13 WEEKS 3 DAYS GESTATIONAL AGE WITH NORMAL NUCHAL TRANSLUCENCY

-This is the end of the report-

ADV : TIFFA Scan at 20-22 weeks GA

Note : No gross anomalies however all anomalies cannot be ruled out by this scan , since assessment of fetal anomalies depends on fetal position, liquor volume, maternal obesity and period of gestation.

- While doing ultrasonography I have neither detected nor disclosed the sex of her fetus to anybody in any manner

Dr.RAJU PEDDI,MD
Radiologist
Regd No-46816

Note : 1. The Science of the Radiological Diagnosis is based on the interpretation of various shadows / densities produced by both the normal and abnormal tissue. Dissimilar diverse diseases produce similar shadows, hence this report represents only some of the various possibilities and a number of variables known and unknown does exist. Hence this report has limitations and is not valid for medico-legal purposes.
2. Suggested clinical correlation, discuss if required.