



SHRI MAHALAXMI

SONOGRAPHY AND XRAY CLINIC

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MBBS, MD Radiodiagnosis
Fetal Medicine Foundation Certified (UK)
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NAME: MRS. TEJSHRI SAGAR MAHANVAR
REF: DR. SMITA.P. YADAV. MS

AGE/SEX : 25 YEARS/ FEMALE
DATE: 26-09-23

OBSTETRIC SONOGRAPHY (SCREENING FOR NT)

LMP: 29-06-23

AMENORRHOEA : 12 WEEKS 5 DAYS

EDD BY LMP : 04-04-24

A single live intra uterine fetus is seen.

Cardiac activity present & appear normal.

Placenta is forming anteriorly. Amniotic fluid is adequate.

Nuchal translucency – 0.9 mm (< 5 percentile for CRL--normal) Nasal bone seen.

Intracranial translucency—1.2 mm.

Bowel echogenicity is within normal limits.

Limbs, spine, brain, appears normal at present.

Ductus venous shows normal flow.

Internal OS is closed. Length of the cervix is 3.2 cms.

Foetal gestational parameters are: -

	Measurement	GA
AUA	12 weeks 0 days	09-Apr-24
CRL	5.3 cm	12 weeks 0 days
FHR	161/min	

IMPRESSION:

A single live intra uterine fetus with average gestational age of 12 weeks 0 days.

EDD by USG—09/04/2024.

Nuchal translucency – 0.9 mm (< 5 percentile for CRL--normal) Nasal bone seen.

Mean uterine artery PI is 0.8 (1 percentile--Normal).

Suggest: Clinical correlation/ follow up at 19 weeks for anomaly scan.

[NT scan is a part of screening for few chromosomal anomalies like Downs syndrome (Trisomy 21), other trisomy's (13 & 18), cardiac & other fetal abnormalities. This is not a definitive diagnostic test for chromosomal anomalies. Dedicated combined screening (NT scan + biochemical markers OR NIPT) and other definitive tests are recommended in high-risk group as per the universal guidelines].

Declaration of Doctor:

I, Dr. Shripad S Nandurkar declare that while conducting ultrasonography/image scanning on the above patient, I have neither detected nor disclosed the sex of her foetus to any body in any manner.

DR SHRIPAD S NANDURKAR
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