

Dr. (Mrs.) Priya Singh

M.B.B.S., M.D. (Obst. & Gyne.)

Consultant Obstetrician & Gynaecologist

Reg. No. : MP-3861



डॉ. (श्रीमती) प्रिया सिंह

एम. बी. बी. एस., एम. डी.,

प्रसूति एवं स्त्री रोग विशेषज्ञ

मो. 9425609718 (F)

Consulting Hours : 10:00 a.m. to 11:00 a.m.

06:00 p.m. to 8:00 p.m.

Clinic : E-Block, Shop No. 16, Surendra Landmark
Hoshangabad Road, Bhopal (M.P.)

Mrs. Deepika

Date : 3/10/23

Chauhan

Amenorrhoea 5 Mth

LMP - 28/5/23

RBC - Hypothyroid

EDD - 5/13/24

O-T: Thyrox-25 mcg

Prim

BP 100X1m

ML - 1 year

Adu

Ry

Quadruple
TestO - T: Folsafe - L - 100
X1M + n

x O - T: Softiron Gold

R

x O - T: Corcaneam] 100
X1M

GRD Smart

27SF 00
27SF 00
27SF 00

TT 0.5 ml

IIM

(Sunday Closed) रविवार अवकाश



| | | | |
|-----------|--------------------|----------|------------|
| PT. NAME: | MRS DIKSHA CHOUHAN | AGE/SEX: | 26/FEMALE |
| REF. BY: | DR.PRIYA SINGH | DATE: | 03/10/2023 |

TARGET SCAN (ANOMALY SCAN)

LMP: 28/05/23

CGA: 18WEEKS 2DAYS

Single live foetus in variable presentation at the time of scan.

Fetal parameter:

| | | | |
|---|-------------------------|---------|-------|
| BPD measures | 4.3cm corresponding to | 19Weeks | 1Days |
| HC measures | 16.3cm corresponding to | 19Weeks | 1Days |
| AC measures | 12.9cm corresponding to | 18Weeks | 3Days |
| FL measures | 2.9cm corresponding to | 19Weeks | 1Days |
| Composite gestational age by Sonography | 19weeks | 0Days | |
| Expected date of delivery by Sonography | 27/02/2024 | | |
| Effective Fetal weight is approximately | 258Gm +38 gm | | |

Fetal cardiac activity: is regular. Fetal heart rate is 145 beats/min.

Fetal body and limb movements are normal.

Placenta: on POSTERIOR uterine wall, lower and away from OS shows grade- I maturation.

Umbilical cord: 3 vessels cord is seen. Placental insertion is central. No cord around the neck is seen.

Liquor: is adequate in amount.

Internal OS: is closed. Cervix is normal in length. Endocervical canal appears normal.

Impression: Intrauterine single live fetus of 19 weeks and 0 days duration with CEPHALIC presentation.

Continue...

Note: This report is an opinion not final diagnosis. It Should be correlated clinically with history and examination of patient.
Incase of any discrepancy a review can be asked. Not valid for medicolegal purpose.

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