త్రివేణి హాస్పిటల్
TRIVENI HOSPITAL

గ్రీన్‌లాండ్ హాస్పిటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ.

Dr. G. TRIVENI
M.B.B.S., M.S.(Obgy.)
Obstetrician & Gynaecologist
Infertility Specialist
Regd. No. 52814

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి
M.B.B.S., M.S.(Obgy.)
ప్రసూతి మరియు స్త్రీల వ్యాధి నిపుణులు
Regd. No. 52814

2:37pm

Pt.'s Name: Poojitha W/o Rajashekar Ukandi Age: 21 Sex: F

GPLAD
c̄ 5MA · c̄ Ccs

Date: 18/10/23
Valid Upto: 30/10/23

Wt: 38kgs
Temp: (N)
PR: 82 m/-
BP: 90/70 mmHg
RR: S1S2 (+)
S: NAD

DOB: 01-01-2003

C/O Giddiness
O/E GC Fair
Afeb

PR 80/-
PA - Ut 20-22w
FHS (+)
Relaxed
Liq A

P/V - a/w
Bleeding

LMP: 10/05/23
EDD: 17/12/24
S.EDD:
ML:
Consanguinity Yes/No.
Menstrual Periods: Reg/Irregular

24442233

R
1. T. Pan 40 — 1 — 15d
2. T. Ferrite XT — 1 15d
3. T. Calcitas D3 — 1 15d
4. PC Protein powder — 2 units
5. Syp Ubiquin — 1 — 1

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✆ : 08682-234555

అపర్ణ హాస్పిటల్

స్కానింగ్ సెంటర్

Scan Centre

Beside Greenland Hospital, Doctors Lane, Ansari Colony, Nalgonda.

గ్రీన్‌లాండ్ హాస్పిటల్ ప్రక్కన, డాక్టర్స్ లేన్, అన్సారి కాలనీ, నల్గొండ.

Dr. Moola Aparna Reddy
Reg. No. 51278

డా॥ మూల అపర్ణ రెడ్డి
Reg. No. 51278

Pt NAAME : POOJITHA AGE: 21 Y/F DATE: 16.10.2023

Ref by DR: TRIVENI MS OBG INDICATION: TIFFA

OBSTETRIC ULTRA SOUND SCAN WITH TIFFA REPORT

Single live intrauterine gestation noted transverse presentation at the time of scan
Fetal cardiac activity noted HR =157 BPM
Fetal movements noted
Liquor is adequate, clear
Placenta is posterior grade – I maturity upper segment
No e/o cord around the neck noted

FOETAL BIOMETRY

BPD	:	4.86 cm	20 wks 5 days
HC	:	17.73 cm	20 wks 1 days
AC	:	15.45 cm	20 wks 4 days
FL	:	3.21 cm	20 wks 0 days
CGA	:	20 weeks 3 days	
EDD	:	01/03 / 2024	
BW	:	348 gm +/- 51 gm	
CX	:	3.1 cm ,internal os normal	

Continue----

Note : The science of the radiological diagnosis is based on the interpretation of various shadows produced by both normal & abnormal tissue. Dissimilar diverse diseases produce similar shadows, hence this report is not for confirmation for the diagnosis and only represents part of professional openion in some of the various possibilities and number of variables known & unknown does exist.

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...r. Moola Aparna Reddy
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Reg. No. 51278

TIFFA:

Head and neck:
Cerebellum, cisterna magna normal
Lateral cerebral ventricles are normal
Nuchal fold thickness normal

Face:
Orbit, nose and lips normal, PMT seen

Chest:
Heart 4 chamber view seen
Diaphragm, lungs normal

Abdomen:
Stomach bubble seen at left hypo chondrium with normal situs
Abdominal wall intact
Kidneys, bladder are normal
3 vessel cord with normal insertion noted

Spine: Normal

Extremities: Upper limbs & lower limbs are grossly appear normal

Both uterine arteries show normal colour flow & spectral pattern. No e/o end diastolic notches

IMPRESSION:

-Single live intrauterine gestation of 20 weeks 3 days gestational age + / - 2 weeks
With no obvious anomalies

Advised follow up scans to R/O progressive anomalies
Advised fetal echo

DR. R.APARNA
RADIOLOGIST

I Dr. R. APARNA declare that while conducting USG on POOJITHA 21 Y /F I have neither detected nor disclosed the sex of the fetus to anybody in any manner. Determination of fetal sex is illegal (section PNDT ACT 1994).
Note: Inspite of sincere search all anomalies cannot be ruled out by ultra sound, since assessment of fetal anomalies depends on fetal position, liquor volume, maternal obesity and period of gestation at the time of scan.
In BOH with HTN Doppler studies are helpful in evaluating IUGR & viability
All GIT abnormalities & small VSD, ASD, PDA cannot be ruled out with this scan
Ultra sound scan alone cannot exclude all genetic syndromes or chromosomal abnormalities
Hence USG has its own limitations. Please correlate clinically. Interpretation of various shadows produced by both normal & abnormal tissue. Dissimilar diverse diseases produce similar shadows, hence this report is not for confirmation for the diagnosis and only represents part of professional openion in some of the various possibilities and number of variables known & unknown does exist.

Note :