

## Title of PDF Document

This is the subtitle of PDF, Use long text here.



IMAGING &amp; DIAGNOSTIC CENTRE

**Dr. Sandeep Bansal**

M.B.B.S., D.M.R.D. (Radiodiagnosis)  
Consultant Radiologist & Ultrasonologist  
Former Radiologist :  
Pt. Deen Dayal Upadhyay Hospital, New Delhi  
Jawaharlal Nehru Cancer Hospital, Bhopal  
Mob.: 9425338188  
email-nobleimaging@gmail.com

107, Motiya Talab Road, Near GPO. Pathar Wall Gali, Bhopal (M.P.)  
Ph.: 0755-4900503, 2740115, 2772215 Mob. : 9479531572, 8109384407, 8103206596

Pt. Name:	MRS. ROOPALI RAGHUV	Age/Sex:	34 Years /Female
Ref. By:	DR. SUGANDHA VERMA MD (OBS & GYANE)	Date:	02/Dec/2023

**TARGET SONOGRAPHY REPORT****OBSTETRIC USG**

LMP- 23/07/23, GA by LMP-18 weeks 6 days, EDD by LMP-28/04/2024

**Foetal Parameters-**

BPD -	39.4 mm	18 wks	0 days	+ 1 wks	1 day.
HC -	136.7 mm	17 wks	1 days	+ 1 wks	1 day.
AC -	107.0 mm	16 wks	5 days	+ 1 wks	1 day.
FL -	25.2 mm	17 wks	5 days	+ 1 wks	0 day.
HL -	24.0 mm	17 wks	3 days	+ 1 wks	0 day.
TIB -	20.6 mm	17 wks	2 days	+ 1 wks	0 day.
FIB -	19.4 mm				
RAD -	23.1 mm				
ULNA -	19.0 mm	16 wks	4 days	+ 1 wks	0 day.
CEREB-	15.7 mm	16 wks	6 days	+ 1 wks	0 day.
OOD-	25.9 mm	17 wks	0 days	+ 1 wks	0 day.
CM-	4.4 mm				
NF-	2.92 mm				
NB-	4.5 mm				

Mean Gestational Age 17 wks 3 days + 7 days.

Placenta: - Posterior, Involving upper &amp; mid uterine segment, Grade -I (Early)

Foetus - Single.

Foetal Presentation - Breech (at the time of examination)

Liquor- Adequate.

Foetal Heart Rate - 145 BTS/min, regular. (Normal Range 120 to 180 Beats/Min)

Foetal Movements- Present and normal.

Expected Foetal Weight- 184 grams,  $\pm 10\%$  of Foetal Weight by Hadloc/Sheprd, formula.

Expected Date of Delivery by USG- 08/05/2024.

**HEAD-**

- ✓ Head appears normal in size & shape. Cerebral structures appear normal.
- ✓ Both lateral ventricles appear normal. Cavum septum pellucidum is seen.
- ✓ Cerebellum appears normal. Cisterna magna is normal in shape & size. No SOL is seen.

**SPINE-**

- ✓ Full length vertebral column is visualized in sagittal, coronal & transverse planes. Normal alignment of vertebrae is recorded. No obvious defect was visualized.

**NECK-**

- ✓ No cystic lesion is visible around the foetal neck.

P.T.O.....



# Title of PDF Document

This is the subtitle of PDF, Use long text here.

Continued page 2.....

## FACE-

- ✓ Foetal face was visualized in profile & coronal scans.
- ✓ Both eyeballs, nose & lips appear normal. Nasal bone was well visualized.

## THORAX-

- ✓ Normal cardiac Situs & cardiac position..
- ✓ Four chamber view & outflow tracts view appear normal (Dedicated foetal echo required for further cardiac evaluation).
- ✓ Both lungs were visualized. No evidence of pleural effusion or pericardial effusion. No SOL in thorax seen.

## ABDOMEN-

- ✓ Anterior abdominal wall appears intact. Umbilical cord insertion was visualized. Normal abdominal Situs..
- ✓ Foetal liver, gall bladder, stomach & bowel loops appear normal. No ascites seen.

## URINARY TRACT-

- ✓ Both kidneys appear normal in size. No pelvicalyceal dilatation seen. Urinary bladder appears normal.

## LIMBS-

- ✓ All four limbs are seen. Long bones appear normal for period of gestation. Both hands & feet appear normal.

## Impression:

- No gross congenital anomaly detected at the time of examination.
- Real time obstetric USG study reveals:-Single, live foetus in breech presentation at the time of examination, corresponding to a mean gestational age of 17 weeks 3 days.
- Liquor is adequate.
- Cervical length measures 2.5 cms.

### Declaration of Doctor / Person conducting U.S.G./Image Scanning

I, DR. SANDEEP BANSAL declare that while conducting U.S.G. on MRS. ROOPALI RAGHUV, I have neither declared nor disclosed the sex of her foetus to anybody in any manner.

**DR SANDEEP BANSAL**  
**RADIOLOGIST, MCR 4771**

ALL ANOMALIES CANNOT BE RULED OUT BY THIS SCAN ASSESSMENT OF FOETAL ANOMALIES DEPEND ON VARIOUS FACTORS, FOETAL POSITION, ADVANCED GESTATION, LIQUOR USG MAKERS FOR SCREENING OF CHROMOSOMAL ANOMALY MAY NOT BE ALWAYS EVIDENT & SUCH AS THEIR OBSCURE MAY NOT RULE OUT THE CHROMOSOMAL ANOMALY. PATIENT HAS BEEN COUNSELED ABOUT THE CAPABILITIES & LIMITATIONS OF THIS EXAMINATION. THIS REPORT NOT INCLUDE 2D ECHO OF FOETAL HEART. THIS REPORT IS ONLY A PROFESSIONAL OPINION AND NOT THE DIAGNOSIS. IT SHOULD BE CLINICALLY INTERPRETED BY THE CLINICIAN. NOT FOR MEDICO-LEGAL PURPOSES. COMPLETE COMMENT CANNOT BE MADE ON ALL FOUR FOETAL LIMB MAYBE DUE TO ADVANCED GESTATIONAL AGE & FOETAL POSITION.



## Title of PDF Document

This is the subtitle of PDF, Use long text here.



IMAGING &amp; DIAGNOSTIC CENTRE

**Dr. Sandeep Bansal**M.B.B.S., D.M.R.D. (Radiodiagnosis)  
Consultant Radiologist & Ultrasonologist

Former Radiologist:

Pt. Deen Dayal Upadhyay Hospital, New Delhi  
Jawaharlal Nehru Cancer Hospital, Bhopal

Mob.: 9425338188

email:nobleimaging@gmail.com

107, Motiya Talab Road, Near GPO, Pathar Wall Gali, Bhopal (M.P.)

Ph.: 0755-4900503, 2740115, 2772215 Mob.: 9479531572, 8109384407, 8103206596

Pt. Name:	MRS. ROOPALI RAGHUV	Age/Sex:	34 Years /Female
Ref. By:	DR. SUGANDHA VERMA MD (OBS & GYANE)	Date:	02/Dec/2023

**TARGET SONOGRAPHY REPORT****OBSTETRIC USG**

LMP- 23/07/23, GA by LMP-18 weeks 6 days, EDD by LMP-28/04/2024

**Foetal Parameters-**

BPD -	39.4 mm	18 wks	0 days	+ 1 wks	1 day.
HC -	136.7 mm	17 wks	1 days	+ 1 wks	1 day.
AC -	107.0 mm	16 wks	5 days	+ 1 wks	1 day.
FL -	25.2 mm	17 wks	5 days	+ 1 wks	0 day.
HL -	24.0 mm	17 wks	3 days	+ 1 wks	0 day.
TIB -	20.6 mm	17 wks	2 days	+ 1 wks	0 day.
FIB -	19.4 mm				
RAD -	23.1 mm				
ULNA -	19.0 mm	16 wks	4 days	+ 1 wks	0 day.
CEREB-	15.7 mm	16 wks	6 days	+ 1 wks	0 day.
OOD-	25.9 mm	17 wks	0 days	+ 1 wks	0 day.
CM-	4.4 mm				
NF-	2.92 mm				
NB-	4.5 mm				

Mean Gestational Age 17 wks 3 days + 7 days.

Placenta: - Posterior, involving upper &amp; mid uterine segment, Grade -I (Early)

Foetus - Single.

Foetal Presentation - Breech (at the time of examination)

Liquor- Adequate.

Foetal Heart Rate - 145 BTS/min, regular. (Normal Range 120 to 180 Beats/Min)

Foetal Movements- Present and normal.

Expected Foetal Weight- 184 grams,  $\pm 10\%$  of Foetal Weight by Hadloc/Sheprd, formula.

Expected Date of Delivery by USG- 08/05/2024.

**HEAD-**

- ✓ Head appears normal in size & shape. Cerebral structures appear normal.
- ✓ Both lateral ventricles appear normal. Cavum septum pellucidum is seen.
- ✓ Cerebellum appears normal. Cisterna magna is normal in shape & size. No SOL is seen.

**SPINE-**

- ✓ Full length vertebral column is visualized in sagittal, coronal & transverse planes. Normal alignment of vertebrae is recorded. No obvious defect was visualized.

**NECK-**

- ✓ No cystic lesion is visible around the foetal neck.

P.T.O.....



# Title of PDF Document

This is the subtitle of PDF, Use long text here.

Continued page 2.....

## FACE-

- ✓ Foetal face was visualized in profile & coronal scans.
- ✓ Both eyeballs, nose & lips appear normal. Nasal bone was well visualized.

## THORAX-

- ✓ Normal cardiac Situs & cardiac position..
- ✓ Four chamber view & outflow tracts view appear normal (Dedicated foetal echo required for further cardiac evaluation).
- ✓ Both lungs were visualized. No evidence of pleural effusion or pericardial effusion. No SOL in thorax seen.

## ABDOMEN-

- ✓ Anterior abdominal wall appears intact. Umbilical cord insertion was visualized. Normal abdominal Situs..
- ✓ Foetal liver, gall bladder, stomach & bowel loops appear normal. No ascites seen.

## URINARY TRACT-

- ✓ Both kidneys appear normal in size. No pelvicalyceal dilatation seen. Urinary bladder appears normal.

## LIMBS-

- ✓ All four limbs are seen. Long bones appear normal for period of gestation. Both hands & feet appear normal.

## Impression:

- No gross congenital anomaly detected at the time of examination.
- Real time obstetric USG study reveals:-Single, live foetus in breech presentation at the time of examination, corresponding to a mean gestational age of 17 weeks 3 days.
- Liquor is adequate.
- Cervical length measures 2.5 cms.

### Declaration of Doctor / Person conducting U.S.G./Image Scanning

I, DR. SANDEEP BANSAL declare that while conducting U.S.G. on MRS. ROOPALI RAGHUV, I have neither declared nor disclosed the sex of her foetus to anybody in any manner.

**DR SANDEEP BANSAL**  
**RADIOLOGIST, MCR 4771**

ALL ANOMALIES CANNOT BE RULED OUT BY THIS SCAN ASSESSMENT OF FOETAL ANOMALIES DEPEND ON VARIOUS FACTORS, FOETAL POSITION, ADVANCED GESTATION, LIQUOR USG MAKERS FOR SCREENING OF CHROMOSOMAL ANOMALY MAY NOT BE ALWAYS EVIDENT & SUCH AS THEIR OBSCURE MAY NOT TOTALLY RULE OUT THE CHROMOSOMAL ANOMALY. PATIENT HAS BEEN COUNSELED ABOUT THE CAPABILITIES & LIMITATIONS OF THIS EXAMINATION. THIS REPORT DOES NOT INCLUDE 2D ECHO OF FOETAL HEART. THIS REPORT IS ONLY A PROFESSIONAL OPINION AND NOT THE DIAGNOSIS. IT SHOULD BE CLINICALLY INTERPRETED BY THE CLINICIAN. NOT FOR MEDICO-LEGAL PURPOSES. COMPLETE COMMENT CANNOT BE MADE ON ALL FOUR FOETAL LIMB MAYBE DUE TO ADVANCED GESTATIONAL AGE & FOETAL POSITION.