



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

సంప్రదించు వేళలు :

ప్రతిరోజు ఉ. గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు

ఆదివారం ఉ. గం. 10-00 నుండి మ. గం. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి

M.B.B.S., M.S., (Obgy)

ప్రమాది మరియు స్త్రీల వ్యాధి నిపుణులు

Regd. No. 52814

Pt's Name: Sujatha Thirumala Nagesh Vill. Pullinamidi Age 26 Sex F

GPLAD

E 3MA ECG

Date: 21/12/23

Valid Upto: 21/01/24

Wt: 55 Kgs

Temp: 97.5 F

PR: 82 bpm

BP: 110/70 mmHg

Heart: S.S. ⊕

Lungs: NAD

DOB: 20-07-1997

CO Bleeding Pt. 1 day

O/E Gc: Fair

Abdomen

PR 80 bpm

PA - Soft

Non-tender

Pt. ut bulky

Bleeding ⊕

Threatened abortion

LMP: 07/10/23

EDD: 14-07-24

S.EDD:

ML:

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

R

1. T. Monofetal
1-1-7d

2. T. Twin
1-1-7d

3. T. Polycephalic
1-1-10d

4. T. New gestu 3000g
1-1-10d

5. T. Fetal
1-1-10d

6. T. Placenta
1-1-10d

21/832118

OTR

Pink esophagus

MRS SUJA KEERTHANA

Date of birth : 20 July 1997, Examination date: 02 January 2024

Address: NALGONDA

Hospital no.: KFC4360

Mobile phone: 8688424667

Referring doctor: TRIVENT

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 1; Deliveries at or after 37 weeks: 1.

Maternal weight: 57.0 kg; Height: 152.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Preeclampsia in previous pregnancy: no;

Previous small baby: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 07 October 2023

EDD by dates: 13 July 2024

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 12 weeks + 3 days from dates

EDD by scan: 13 July 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	163 bpm
Crown-rump length (CRL)	56.0 mm
Nuchal translucency (NT)	1.4 mm
Biparietal diameter (BPD)	18.0 mm
Ductus Venosus PI	0.900
Placenta	anterior low
Amniotic fluid	normal

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: Appears normal; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI: 0.70 equivalent to 0.410 MoM

Endocervical length: 31.0 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 880	1: 17601
Trisomy 18	1: 2067	1: 12220
Trisomy 13	1: 6506	<1: 20000
Preeclampsia before 34 weeks		1: 6910

Fetal growth restriction before 37 weeks

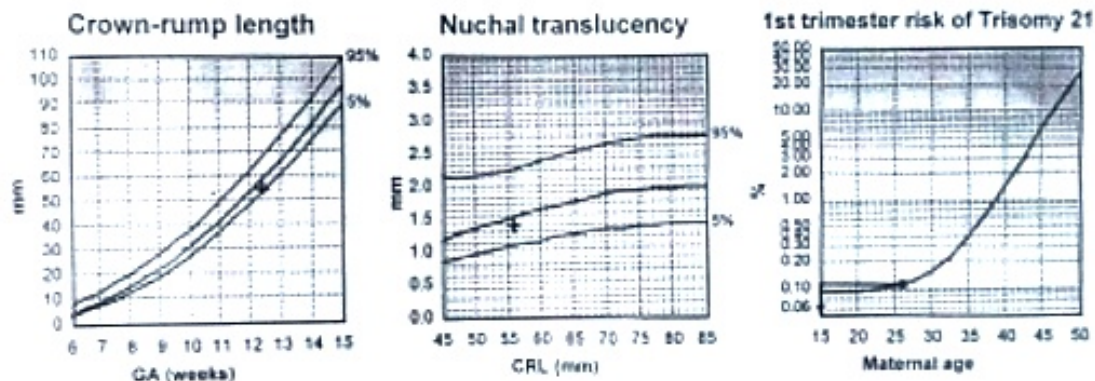
1: 366

The background risk for aneuploidies is based on maternal age (26 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler.

All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).



Comments

Single live intra uterine fetus corresponding to 13 weeks 4 days.

Down syndrome screen negative based on NT scan.

Retroplacental collection measuring 5.6 x 1.5 cms from lower edge of placenta near cervix.

Suggested DOUBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (Feb 22nd to 24th)

I, Dr. L. Kalpana Reddy, declared that while conducting ultrasonography / imaging scanning on Mrs. SUJAKEERTHANA, I have neither detected nor disclosed the sex of fetus to any body in any manner.

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT