

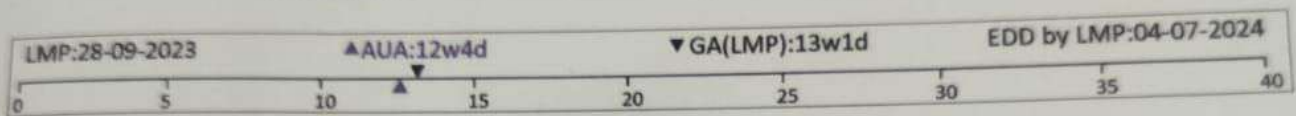


Patient Name: MANJUSHA RAJESHWAR GADEKAR	Date: 29/12/2023
Patient Id: 17946	Age/Sex: 33 Years / FEMALE
Ref Phy: DR. VIVEK CHINCHOLE SIR (M.D.)	

OBSTETRIC NT SCAN

INDICATION: For fetal growth, weight & well being

Height : 152 cm	BP	MAP
Weight : 57.1 kg	Systolic 120	92.67
BMI : 24.71	Diastolic 79	mmHG



Dating	LMP	GA	Weeks	Days	EDD
By LMP	LMP: 28/09/2023	13	1		04/07/2024
By USG		12	4		08/07/2024

AGREED DATING IS (BASED ON LMP)

There is a single gestation sac in uterus with a single fetus within it. ✓

The fetal cardiac activities are well seen. ✓

Placenta is **anterior** in nature. It is 2.8 cm away from internal OS.

Amniotic Fluid: Normal. ✓

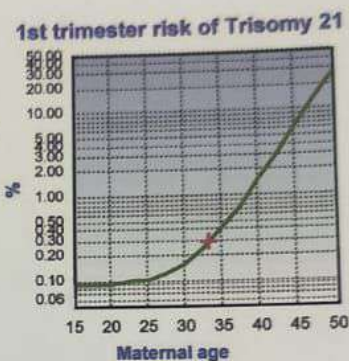
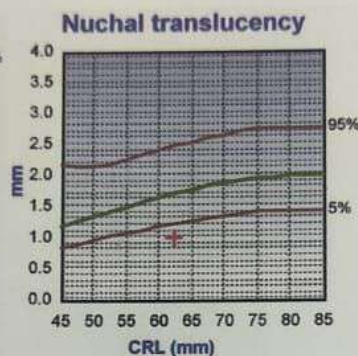
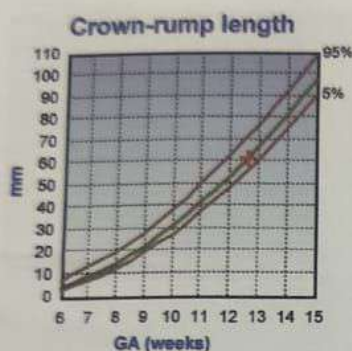
Internal os is closed and length of cervix is normal 3.3 cm.

Embryonal Growth Parameters	mm	Weeks	Days
Crown Rump Length	62.1	12	4
Heart Rate	142 Beats Per Minute.		
The Embryo attains 40 weeks of age on	08/07/2024		
Nuchal Translucency	1 mm 12% + — + — +		
Nasal Bone	3 mm 35.3% + — + — + 35%		
Hands, Limbs, Nasal Triangle Integrity, Bladder, Stomach & Umbilical Arteries	Seen		
Ductus Venosus Waveform	Normal waveform Pattern		

Vessels	S/D	RI	PI	PI Percentile	Remarks
Right Uterine Artery	3.34	0.7	1.37	26.8% + — + — +	No early Diastolic notch seen
Left Uterine Artery	7.04	0.86	2.61	98.5% + — + — +	Early Diastolic notch seen
Mean Uterine Artery			1.99	83% + — + — +	Normal
Ductus venosus	4.1		1.02		PSV=-31.83 Normal waveform Pattern



	Risk From History Only		Risk From History Plus NT, FHR (Fetal medicine by UK)	
Trisomy 21:	1	in 333	1	in 667
Trisomy 18:	1	in 769	1	in 154
Trisomy 13:	1	in 2500	1	in 10000



First trimester: Pre Ultrasound Maternal age risk for Trisomy 21 is **1 in 383**

T21 Risk	
From - NT	1 in 2253
From - NT-NB-DV-FHR	1 in 3132

IMPRESSION:

- SINGLE LIVE INTRAUTERINE FETUS OF 12 WEEKS 4 DAYS IS PRESENT. ✓
- NT THICKNESS NORMAL. NASAL BONE SEEN. DUCTUS FLOW NORMAL. ✓
- PLEASE CORRELATE WITH DUAL/TRIPLE MARKER TEST. ✓

Suggested Anomaly scan at 19 weeks: 08/02/2024 ± 2 days

Please note that all anomalies can not be detected all the times due to various technical and circumstantial reasons like gestation period, fetal position, quantity of liquor etc. The present study can not completely confirm presence or absence of any or all the congenital anomalies in the fetus which may be detected on post natal period. Growth parameters mentioned herein are based on International Data and may vary from Indian standards. Date of delivery (at 40 weeks) is calculated as per the present sonographic growth of fetus and may not correspond with period of gestation by L.M.P. or by actual date of delivery. As with any other diagnostic modality, the present study should be correlated with clinical features for proper management. Except in cases of Fetal Demise or Missed Abortion, sonography at 20-22 weeks should always be advised for better fetal evaluation and also for base line study for future reference.

I, Dr. Asmita Chinchole declare that while conducting sonography on MANJUSHA RAJESHWAR GADEKAR (name of pregnant woman), I have neither detected nor disclosed the sex of the fetus to anybody in any manner.

Signature of Dr. Asmita Chinchole
28/12/2023

Dr. Asmita Chinchole,

DR. ASMITA SHON CHINCHOLE

Balaji Complex, Behind S.T. Stand, Jambhrun Road, Buldana-443001. Phone : 245496

Consultation time : Morning 09.00a.m. to Evening 6.00p.m. Sunday closed.

Om Diagnostic Centre Buldana

Page 2