



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 ఉ. 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 Mangula w/o Nagesh VIII pallarla Age 22y Sex F

GPLAD

4 MA

Date: 21/2/24

Valid Upto 21/2/24

Wt : 69 kg's

P/O Gynaec

Temp : (N)

PR : 82/rb

OLE 4C: Fan

BP : 100/70 mm/Hg

Alex

Heart : SIS (I)

PR-gu

Lungs : NAD

Nucleo

PANut Bulb

DOB: 01-2-1997

LMP : 01-11-23

EDD : 8-08-24

S.EDD: 18-08-24

ML :

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

By: A0013736

21/2/24/Pos

Adv
Double mask

T. Dydrogpal 10mg
1 - 15d
T. Algesteron 20mg
1 - 15d

1. T. Pantoles
1 - 15d

2. T. Follex 10
1 - 15d

3. T. Colded
+ 15d

4. Exp Uteroflex
100 - 15d

PS

CHIRUPONG Fetal Medicine and Scan Center

Protecting the Precious...

MRS MANJULA

Date of birth : 01 February 1997, Examination date: 07 February 2024

Address: NALGONDA

Hospital no.: KFC12197

Mobile phone: 998978255

Referring doctor: TRIVENT

Maternal / Pregnancy Characteristics:

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

Parity: 0.

Maternal weight: 69.0 kg; Height: 152.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 01 November 2023

EDD by dates: 07 August 2024

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 12 weeks + 1 days from CRL

EDD by scan: 20 August 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	161 bpm
Crown-rump length (CRL)	56.0 mm
Nuchal translucency (NT)	1.2 mm
Biparietal diameter (BPD)	19.0 mm
Ductus Venosus PI	1.100
Placenta	posterior low
Amniotic fluid	normal

Chromosomal markers:

Nasal bone: can not examine; 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: 1.40 equivalent to 0.850 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: 848	1: 4241
Trisomy 18	1: 1992	1: 6037
Trisomy 13	1: 6271	<1: 20000
Preeclampsia before 34 weeks		1: 403
Fetal growth restriction before 37 weeks		1: 204

Page 1 of 2 printed on 07 February 2024 - MRS MANJULA examined on 07 February 2024.

8-2-71/1/ఎ. గ్రీన్‌లాండ్ పబ్లిక్ హాస్పిటల్ ఎదురుగా, డాక్టర్స్ కాలనీ, వల్లగొండ - 508 001, తెలంగాణ

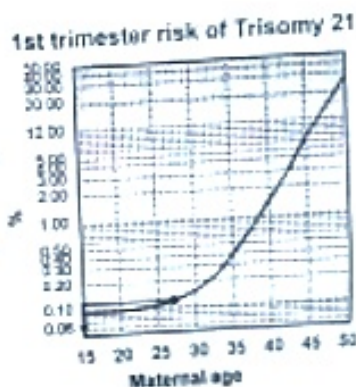
For Appointment : ☎ +91 8522 856 854 | +91 9704 234 016

Protecting the Precious:

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history and uterine artery Doppler. Characteristics are corrected as necessary according to several maternal characteristics, gestational age, parity, and fetal position and parity.

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 103716). 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).



Single live intra uterine fetus corresponding to 12 weeks 1 days.

Down syndrome screen negative based on NT scan.

Suggested **DOUBLE MARKER.**

NASAL BONE CAN NOT EXAMINE.

Suggested TIFFA SCAN at 19 to 20 weeks. (Mar 27th to 31st)

Suggested TIFFA SCAN DT: 11/07/2018

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

✍

DR.L.KALPANA REDDY
FETAL MEDICINE CONSULTANT