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Insight Imaging & Endovascular Clinic

ADVANCED DIAGNOSTIC CENTRE & INTERVENTIONAL RADIOLOGY CLINIC

166, Tajshree Tower, In front of Choudhary Hospital, Sakkardara, Nagpur. | M +91 7972595800 | 8446551606

PATIENT NAME : MRS. TWINKLE MAHATO (24 YRS/ F)
REF BY. : DR. SHWETA LODHI
EXAMINATION : USG – OBS FOR ANOMALY
DATE : 22/02/2024
LMP : 11/10/2023 (19 WEEKS, 1 DAY)

OBSERVATION:

- Single live intra-uterine pregnancy with variable presentation on present scan.
- Fetal body movements & cardiac activity appears normal.
- BPD 4.58cm- 19 weeks- 6 days
  HC 16.57 cm- 19 weeks- 2 days
  FL 2.99 cm- 19 weeks- 2 days
  AC 13.70 cm- 19 weeks- 1 day
  CGA 19 weeks 3 days
- Placenta is fundo-posterior, grade II maturity, away from internal os. No placenta previa.
- Heart appears 4 chambered. Both ventricles appear normal, shows usual thickness of the myocardium. Intraventricular septum appears normal. Outflow tracts and Arch of aorta is normal. No pericardial effusion.
- Head circumference is normal. Ventricular system appears normal in dimension (Maximum transverse diameter of lateral ventricle- 5.6mm). Cerebellum – 19mm in diameter. Cisterna magna- 2.7mm and nuchal fold thickness- 3.0mm. No hydrocephalus. Choroid plexus are normally placed and show usual echogenicity. Posterior fossa, craniovertebral junction and spine appear normal. No obvious spin bifida/myelomeningocele on present scan. No cleft palate/no cleft palate.
- Both kidneys are corresponding in length with fetal age. No pelvicaliectasis (Renal pelvis AP diameter measures on Right: 1.9mm, Left: 2.0mm). Urinary bladder is well distended. Stomach bubble is in its usual position. Three vessel cord seen. Bowel loops show usual echogenicity. Visualised fetal limbs appear normal. *All fetal fingers, toes and ear anomalies cannot be entirely ruled out.*
- Liquor is normal for the period of gestational age. Cervix appears normal; measuring 3.2cm. Internal os is closed.
- Fetal heart rate- 149 BPM Fetal weight is 280 gms ± 41 gms.
- EDD by CGA: 15/07/2024
- PI in right uterine artery- 1.9 PI in left uterine artery- 1.1

IMPRESSION:

A single live intrauterine fetus of sonic gestational ages of 19 weeks 3 days gestation with variable presentation and fundo-posterior placenta.
No obvious lethal congenital anomalies seen on present scan. Follow up USG for evolving anomalies & Fetal echo at 22-24 weeks and quadruple marker tests suggested.

I, Dr. Pradip Rathod declare that while conducting sonography of Pt. Twinkle Mahato, I have neither detected nor disclosed the sex of fetus to anybody in any manner or form. Note: All congenital malformations cannot be rule out at this gestational age. Detection of congenital malformation depend on the position of fetus at the time of evaluation. Some fetal anatomical structures may not be well visualised due to fetal lie and position. This scan does not include Fetal 2D Echo. Some abnormalities evolve as gestation advances and some can become apparent after birth.

Dr. Pradeep Rathod, MD
Consultant Radiologist
+91 [illegible]

Dr. Manish Agrawal, MD, DNB
Consultant & Interventional Radiologist
+91702058465

mrs. Twinkle Mahato

DOB- 14/11/1998

Wt - 74kg

Ht - 5.0

LMP- 11/10/2023