



త్రైవేణి హాస్పిటల్

TRIVENI HOSPITAL



గ్రీన్లాండ్ హాస్పిటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్గొండ

Dr. G. TRIVENI

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

Obstetrician & Gynaecologist

Infertility Specialist

Regd. No. 52814

పంపించు వేళలు :

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

ఆదివారం ఊ గం. 10-00 నుండి ఊ గం. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి

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

ప్రమాతి మరియు స్త్రీల వ్యాధి నిపుణులు

Regd. No. 52814

Pt's Name Mrs. Khizna w/o Mahimaduttimph Nalgonda Age 26 Sex F

GPLAD

3MA & US

Date: 9/3/24

Valid Upto 23/3/24

Wt : 74 Kg

Temp : (N)

PR : 82 Mt

BP : 120/80 mm/Hg

Heart : S1, S2 (+)

Lungs : NAD

DOB: 20-12-1997

C/O fever & CBA &

Throat pain : 3 days

O/E G.C. Fever

PA. Soft
Nontender
BS +

Pt. at Beddy

LMP : 15-12-23

EDD : 22-09-24

S.EDD: 20-09-24

ML :

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

A0014428

Adv
from pedicle

NT + DM

T. Amoxyclet 4625mg
150

T. Levri M
150

T. Dolo 65mg
150

Syp Ceftriaxone 800mg
1ml



First Trimester Screening Report

Kalpana Fetal Medicine and Scan Center

Protecting the Precious...

MRS KHIZRA

Date of birth : 20 December 1997, Examination date: 11 March 2024

Address: NALGONDA

Hospital no.: KFC12729

Mobile phone: 9392248821

Referring doctor: TRIVENI

Maternal / Pregnancy Characteristics:

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

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

Maternal weight: 74.0 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: 15 December 2023

EDD by dates: 20 September 2024

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 13 weeks + 1 days from CRL

EDD by scan: 15 September 2024

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	178 bpm	
Crown-rump length (CRL)	69.0 mm	
Nuchal translucency (NT)	1.9 mm	
Biparietal diameter (BPD)	24.0 mm	
Ductus Venosus PI	0.500	
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: 1.60 equivalent to 1.050 MoM

Endocervical length: 35.0 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 923	1: 7958
Trisomy 18	1: 2308	1: 9722
Trisomy 13	1: 7224	1: 577
Preeclampsia before 34 weeks		1: 589

Page 1 of 2 printed on 11 March 2024 - MRS KHIZRA examined on 11 March 2024.

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

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

Fetal growth restriction before 37 weeks

1: 315

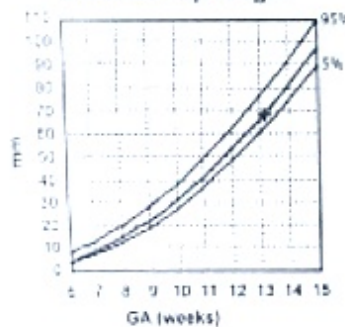
The background risk for aneuploidies is based on maternal age (26 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate).

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

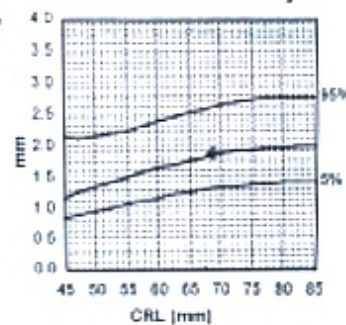
All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

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).

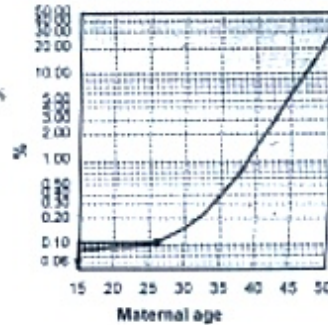
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Comments

Single live intra uterine fetus corresponding to 13-weeks 1 days.

Down syndrome screen negative based on NT scan.

Suggested **DOUBLE MARKER**.

Suggested **TIFFA SCAN** at 19 to 20 weeks. (Apr 26th to 29th)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT