INARA'S
FEMISCAN
DIAGNOSTICS & INTERVENTION

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NAME : MRS. SURBHI SINGH	AGE/SEX : 29 YR/F
REFERRED BY: DR. NUTAN YADAV	DATE : 13/03/2024
LMP : 23/12/2023	EDD BY LMP : 28/09/2024

OBSTETRIC SONOGRAPHY – NT/NB SCAN (EARLY ANOMALY SCAN)

Real time, B mode ultrasonography of the gravid uterus was performed.
Route : Transvaginal
Single Intra uterine gestation.

MATERNAL : Cervix measured 4.41 cm in length.

Right Uterine Artery PI	1.31	Normal.
Left Uterine Artery	1.67	Normal.
Mean PI	1.53	Normal (38th centile)

FETUS :

Survey

Placenta - **Forming posteriorly, reaching upto os.**
No retroplacental clot or haemorrhage seen.

Liquor - Adequate

Umbilical Cord - Three vessel cord seen with normal cord insertion.

Fetal Movements - Present

Cardiac activity - Present FHR - 158 bpm

Fetal Biometry :

PARAMETERS	DIMENSIONS	GESTATIONAL AGE
CRL	54.8 mm	12 Wks 0 days
FL	6.9 mm	12 Wks 1 days

PTO.

Address : First Floor, Achraj Tower 2, Chhaoni, Chindwara Road, Nagpur - 13 (M.S.)
For Appointment : 7447447866 - 7447774656

ANEUPLOIDY MARKERS :

Nasal Bone : ossified, NBL - 2.19 mm (21%centile)

Nuchal Translucency : 0.80 mm (LOW RISK)

Ductus Venosus : Normal flow (PI - 0.89)

No evidence of tricuspid regurgitation.

FETAL ANATOMY :

Fetal intra cranium, stomach bubble, kidneys, bladder and limbs to the extent seen at this period of gestation appeared normal. Four limbs visualised.

BPD corresponds to 12 weeks 5 days.

No significant major lethal congenital abnormality noted at present.

EDD assigned by USG - 22/09/2024

IMPRESSION :

Single, Live intrauterine gestation corresponding to gestational age of 12 weeks 3 days.
Menstrual age is 11 weeks 4 days.
Low lying posterior placenta, reaching upto os.
Nuchal translucency is normal.
No significant lethal congenital abnormality noted at present scan.

Suggested Double marker correlation, follow up for placental migration and detailed anomaly scan at 18-20 weeks.

DR. ALMAS NAZIM
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2015/05/2732
CONSULTANT RADIOLOGIST

Disclaimer : Ultrasound investigation has its limitations. Please note that detailed fetal anatomy may not always be visible due to technical difficulties. Also, all fetal anomalies may not necessarily be detected at every examination.

I, Dr. Almas Nazim, hereby declare that while conducting this ultrasound examination, sex of fetus was not disclosed or mentioned to the patient or anybody else in any manner.