



# TEST REQUISITION FORM (TRF)

SPL CODE : SPL C67020 msp Patholab.

| S.No.: | Patient Name in Capital | Age/Sex | Test Code & Test Name             | Sample Type | Barcode No. |
|--------|-------------------------|---------|-----------------------------------|-------------|-------------|
| 1.     | Mrs.<br>ANKITA          | 34/1F   | Triple MARKAR                     | Scenes      |             |
| 2.     | BATAT                   |         | Height - 5.6 cm<br>Weight - 83 Kg |             | 94633018    |
| 3.     |                         |         | DOB - 24/05/1990                  |             |             |
| 4.     |                         |         | IMP - 02/12/2023                  |             |             |
| 5.     |                         |         | MO, VO - 8878052341               |             |             |

\* Note Attached Clinical Report If Required

Dual Marker (9.0-13.6 wks)

✓  
Triple and Quad Marker (14.0-22.6 wks)

Patient Name : Mrs ANKITA BAJAJ Sample collection date :

Vial ID : 24633015

Date of Birth (Day/Month/Year) : 24/5/1996

L.M.P. (Day/Month/Year) : 02/11/2023

Gestational age by ultrasound (Weeks/days) : \_\_\_\_\_ Date of Ultrasound : 9/3/24

Nuchal thickness (in mm) : \_\_\_\_\_ CRL (in mm) : 84.85 BPD : \_\_\_\_\_

Nasal bone (Present/Absent)

Ultrasound report : First trimester  Second trimester

Sonographer Name : NIT SCAN

Weight(Kg) : 83 Kgs

Diabetic status : Yes  No

Smoking : Yes  No

Gestation : Single  Twins

Race : Asian  African  Caucasian  Others

IVF : Yes  No  If Yes, Own Eggs  Donor Eggs

If Donor Eggs, Egg Donor birth date : 1/1/

Previous pregnancies :

With Down Syndrome : Yes  No

With Neural tube Anomaly : Yes  No

Any other Chromosome anomaly : Yes  No

Data Filled by :

**Dr. ANIL AGARWAL**

M.B.B.S., D.M.R. (Emeritus Member IRIA)  
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Reg. No.: CGMC 3917/2012  
09 March 24

Mrs. Ankita Bajaj, 34 Years, F.  
Ref Dr. Smt. B. Dubey, M.D. (GYNAE).

### OB – FIRST TRIMESTER SCAN REPORT ( NT SCAN ):

L.M.P – 02.12.2023  
Period of amenorrhea – 14 weeks, 0 day.  
EDD by LMP – 07.09.2024

#### Indication (s):

10 - Detection of chromosomal abnormalities, fetal structural defects and other abnormalities and their follow-up.

Route: Transabdominal.  
Single intrauterine gestation.

#### Maternal survey:

Cervix – 5.0cms in length.  
Internal os – closed

Uterine arteries show normal diastolic flow and maintained S/D ratio & PI values.

|                      | S/D | PI   |
|----------------------|-----|------|
| Right Uterine artery | 2.7 | 1.16 |
| Left Uterine artery  | 2.4 | 1.01 |

#### Fetal survey:

Placenta – Posterior, Its lower edge is about 5.0cms. from internal os.  
Liquor – Normal  
Umbilical cord – Two arteries and one vein.  
Fetal activity – Present.  
Cardiac activity – Present.  
Fetal heart rate – 160bpm.

Single loop of umbilical cord around fetal neck seen at the time of examination.

#### Biometry (Hadlock)

CRL – 89.85mm (14 weeks, 6 days)

#### Aneuploidy Markers

Nasal Bone – Normal  
Nuchal translucency – 1.3mm ( Normal ).  
Ductus venosus – Normal flow.

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Conti.



DIGITAL X-RAY

O. P. G.

ULTRASONOGRAPHY

Juni Line, Bilaspur (C.G.) 495 001, Phone : 07752-224252

This is only a professional opinion & not the diagnosis. Findings should be correlated clinically. Not for Medico Legal purpose

# DR. AGARWAL'S X-RAY & SONOGRAPHY

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## Fetal Anatomy:

Intracranial structures appeared normal.  
Spine appeared normal. No evidence of significant open neural tube defect.  
Fetal face appeared normal.  
Abdominal situs appeared normal.  
Bladder appeared normal.  
All four limbs are visualized.

## IMPRESSION :-

- SINGLE INTRAUTERINE Viable FETUS WITH AN AVERAGE ULTRASOUND AGE OF 14 WEEKS AND 6 DAYS.
- SINGLE LOOP OF UMBILICAL CORD AROUND FETAL NECK SEEN AT THE TIME OF EXAMINATION.
- PLACENTA - POSTERIOR, NOT LOW LYING.
- LIQUOR - NORMAL.
- USG GUIDED EDD - 01.09.2024
- NORMAL UTERINE ARTERIES PI.

Suggested : Double Marker Test, and Followup USG for anomaly scan at 18 to 20 weeks.

## Disclaimer:

Not all anomalies can be detected on sonography.

All measurement including estimated fetal weight are subject to statistical variations.

I Dr. Esha Agarwal, the undersigned declare that while conducting the ultrasound on Mrs. Ankita Bajaj, I have neither detected nor disclosed the sex of the fetus to anyone in any manner.

Thanks for reference.

Dr. (Mrs.) ESHA AGARWAL,  
MBBS, DNB (RADIODIAGNOSIS)

Ultrasound diagnosis is based on appearance of grey scale shades and it is also affected by technical pitfalls, hence it is suggested to correlate Ultrasound, clinically and other investigative findings to reach the final diagnosis. No legal liability is accepted. Not for medico legal purpose.

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