



త్రివేణి 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

సంప్రదించు వేళలు :

ప్రతిరోజు ఉ. గం. 10-00 నుండి రాత్రి గం. 7-00 వరకు
ఆదివారం ఉ. గం. 10-00 నుండి మ. 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: Nasreen Ato Younus Vill. Nalgonda Age 26 Sex F

GPLAD

Wt : 60 kg's

Temp : (N)

Pn : 80/min

BP : 100/70 mm/Hg

Heart : S1S2

Lungs : NAO

05-04-1995

G4P2L2 / prw. c/o 12w k+59
A1

c/o Nausea whole
day since pregnancy

p/a - ut 14w k.

c/o subchorionic hemorrhage

Date: 28/3/24

Valid Upto: 11/4/24

MP : 30.12.2023

EDD : 7.10.2024

S.EDD : 5.10.2024

ML :

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

Doc:-

A0014818

Adv
Om-

Rx

1) T. vomikind TDS
x 15 day

2) T. pan D OD BBT
x 15 day

3) T. ferrow XT OD
HS x 15 day

4) T. calcium 1500
OD x 15 day

5) T. Atgut SR 1200
OD x 15 day

4

Kalpana Fetal Medicine and Scan Center

Protecting the Precious...

MRS NASREEN

Date of birth : 05 April 1995, Examination date: 28 March 2024

Address: NALGONDA

Hospital no.: KFC13236

Mobile phone: 9703081899

Referring doctor: TRIVENI

Maternal / Pregnancy Characteristics:

Race/origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 2; Deliveries at or after 37 weeks: 2.

Maternal weight: 60.0 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: 13 December 2023

EDD by dates: 18 September 2024

First Trimester Ultrasound:

US machine: E 6. Visualisation: good.

Gestational age: 13 weeks + 0 days from CRL

EDD by scan: 03 October 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	174 bpm
Crown-rump length (CRL)	68.0 mm
Nuchal translucency (NT)	1.3 mm
Biparietal diameter (BPD)	29.0 mm
Ductus Venosus PI	0.500
Placenta	posterior 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: 1.50 equivalent to 0.950 MoM

Fetal cervical length: 31.0 mm

Patient / Counselling:

Patient counselled and consent given.

Operator: Lekkala Kalpana, FMF Id: 173593

Condition	Background risk	Adjusted risk
Trisomy 21	1: 739	1: 7742
Trisomy 18	1: 1841	1: 7991
Trisomy 13	1: 5765	1: 1943
Preeclampsia before 34 weeks		1: 1221

Page 1 of 2 printed on 28 March 2024 MRS NASREEN examined on 28 March 2024.

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

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

12160

Kalpana Fetal Medicine and Scan Center

Protecting the Precious...

Fetal growth restriction before 37 weeks

1: 296

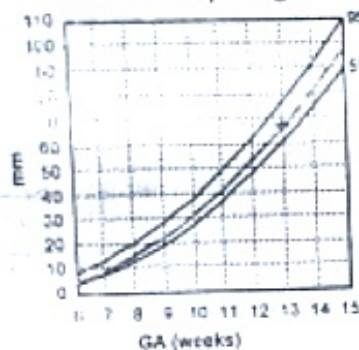
The background risk for aneuploidies is based on maternal age (28 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate).

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

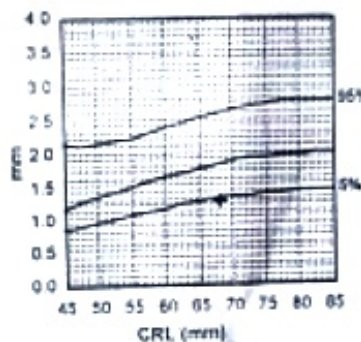
All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

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).

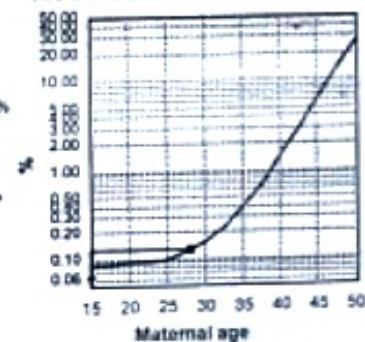
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Comments

Single live intra uterine fetus corresponding to 13 weeks 0 days.

Down syndrome screen negative based on NT scan.

Suggested DUBBLE MARKER.

Suggested TIFFA SCAN at 19 to 20 weeks. (May 12th to 15th)

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

DR. L. KALPANA REDDY
FETAL MEDICINE CONSULTANT