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DEPARTMENT OF RADIODIAGNOSIS  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL  
Saket Nagar, Bhopal M P India - 462 020



ULTRASONOGRAPHY REPORT

OBSTETRICS

Patient's Name: kajal Sahu Age: 32

Date: 30/3/24

OPD Registration No: 239212303050255 Referred By:

USG No.:

12/11/23

LMP -: GA by LMP - 19w6d EDD by LMP - 18/8/24

Number of fetuses - single

Fetal Position - variable

Fetal Heart - seen / Heart Rate 140 bpm

Placenta Position - Anterior

Amniotic fluid - AP8 = Adequate

Fetal Biometry - All measurements are in cms.

BPD = 20 w 3 d

FL = 19 w 5 d

HC = 20 w 1 d

AC = 20 w 6 d

Effective gestational age by USG = 20 w 0 d

Fetal Weight = 346 + 51 g

Screening of Body Parts:

HEAD:

Skull - Normal / dolicocephalic

Nuchal fold thickness - 2.1 mm

Orbital diameter - 10.3 mm

Inter orbital distance - 10.3 mm

✓ Palate, Lips & Nose appear normal



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Brain - Cerebellar diameter (TS) - 18.3 mm

Cisterna magna - 5 mm

Atria of lateral ventricle - 5.2 mm

All the above measurements are within (N) limits.

Fetal Spine : Appears normal. (Parallelism of anterior and posterior lamellae is well maintained)

Chest:  Bilateral Lung appear normal in morphology and parenchymal echogenicity.  
 Diaphragm appears normal

Heart: 4 chambers views suggest normal sizes of all cardiac chambers

- Normal situs
- Normal outflow tracts

Abdomen:  Cord insertion - Normal  
 - 3 Vessel cord is noted

Stomach: Bubble well visualized, normal in position.

Normal distribution, diameter and echogenicity of bowel loops.

Kidney: Bilateral kidneys are normal in size and echogenicity.  
No evidence of hydronephrosis.

Urinary Bladder: appears normal.

Limbs: Humerus length: 28.2 mm  
Tibial length: 28.6 mm  
Foot length: 30.7 mm

Above screening suggest absence of any apparent congenital anomaly.

IMPRESSION: Single live fetus in utero gestation of 36 weeks and no evidence of any congenital anomaly.

#### DECLARATION

Dr. Sakshi Kgal declare that while performing sonography/ Image scanning of \_\_\_\_\_, I have neither detected nor disclosed sex of the fetus to her or anybody in any manner. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness and tissue echogenicity. Therefore all fetal anomalies may not necessarily be detected at every examination. Patient has been counseled about the capabilities and limitations of this examination)

SONOLOGIST:

JUNIOR RESIDENT  
(Academic)  
Dept. of Radiodiagnosis & Imaging  
AIIMS, Bhopal (M.P.)