

सविंद सोलंकी-जगदाले

MBBS, DMRE (Mumbai)
Reg.No. 2008/04/1127

• वेळ : सकाळी १० ते रात्री ९ वा. * रविवार सकाळी १० ते २
• संपर्क : Mo. 7028391535/9158172949



Sneha

Diagnostic Centre & Clinic (Sonography)

Name : MRS. VAISHNAVI DASHRATH DEVKAR

Age/Sex : 20 YEARS/F

Ref By : Dr. SMITA PUSHKRAJ YADAV M.D.

Date : 02 Apr 2024

OBSTETRIC ULTRASOUND NT SCAN

LMP: 28/12/2023	GA by LMP	13 Weeks 5 Days	EDD by LMP	03/10/2024
	GA by USG	13 Weeks 3 Days	EDD by USG	05/10/2024

Uterus gravid and shows single live intrauterine gestational sac.

Sac margins are regular. Fetal pole seen.

Fetal cardiac activity is appreciated. FHR = 154 bpm.

CRL: 7.14 cm-corresponding to gestation of 13 Weeks 3 Days.

Nuchal translucency is 1.8 mm, within normal limits for the gestational age.

Nasal bone seen, Normal.

Ductus venosus shows normal blood flow pattern.

Placenta forming anteriorly. No Subchorionic bleed or collection.

Internal os is closed. Cervix length adequate measures 3 cm.

Right uterine artery PI -1.45 and Left uterine artery PI -1.46 Average uterine artery PI-1.46 at 43 percentile - Normal.

Fetal structural survey: Fetal brain and spine grossly appears normal. Fundic bubble seen. Anterior abdominal wall intact. All four-limb visualized grossly appears normal. Echogenicity of bowel appears normal. Three vessel umbilical cord seen. PMT appears normal.

IMPRESSION:

- Single live intrauterine gestation corresponding to 13 Weeks 3 Days.

- Advised detailed anomaly scan around 18-20 weeks.

Declaration of doctor:- I, Dr. Sneha Solanki the undersigned hereby declare that while conducting ultrasonography on MRS. VAISHNAVI DASHRATH DEVKAR I have neither detected nor disclosed the sex of the fetus to anyone in any manner.

SNEHA GOVIND SOLANKI
M.B.B.S, D.M.R.E.

(However all the anomalies may not always be visualized in a particular scan as ultrasound has its own limitations. Detection of congenital anomalies depends on fetal age, fetal position, liquor amount, tissue penetration of sound waves, patient's body habitus & technical limitations Few anomalies may evolve as pregnancy advances).

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