

First Trimester Screening Report

PANDEY KALYANI

Date of birth : 09 November 1993, Examination date: 06 April 2024

Address: PUNE

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0; Spontaneous deliveries between 16-30 weeks: 0.

Maternal weight: 56.0 kg; Height: 157.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 11 January 2024

EDD by dates: 17 October 2024

First Trimester Ultrasound:

US machine: GE VOLUSON 10. Visualisation: good.

Gestational age: 11 weeks + 6 days from CRL

EDD by scan: 20 October 2024

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	172 bpm	•
Crown-rump length (CRL)	51.7 mm	•
Nuchal translucency (NT)	1.0 mm	•
Biparietal diameter (BPD)	17.1 mm	
Ductus Venosus PI	1.230	•
Placenta	posterior high	
Amniotic fluid	normal	
Cord	3 vessels	

Chromosomal markers:

Nasal bone: present.

Uterine artery PI: 1.52 equivalent to 0.870 MoM

Endocervical length: 30.9 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: SANDEEP PANSARE, FMF Id: 143681

Condition	Background risk	Adjusted risk
Trisomy 21	1: 598	1: 11953
Trisomy 18	1: 1372	1: 9448
Trisomy 13	1: 4327	<1: 20000
Preeclampsia before 34 weeks		1: 644
Fetal growth restriction before 37 weeks		1: 171
Spontaneous delivery before 34 weeks		1: 74

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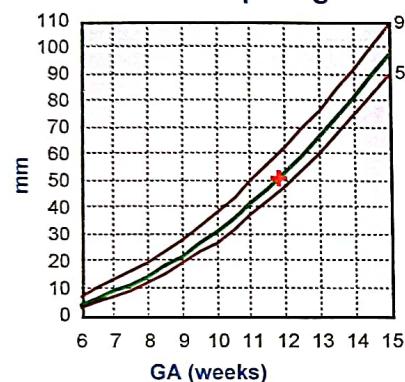
The background risk for aneuploidies is based on maternal age (30 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, fetal heart rate).

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

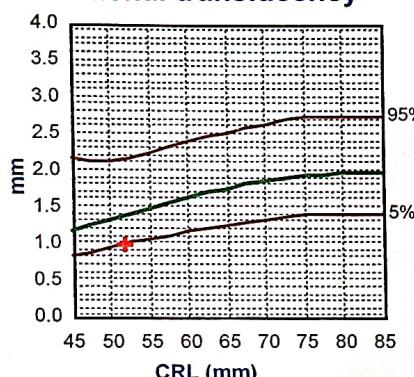
All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

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).

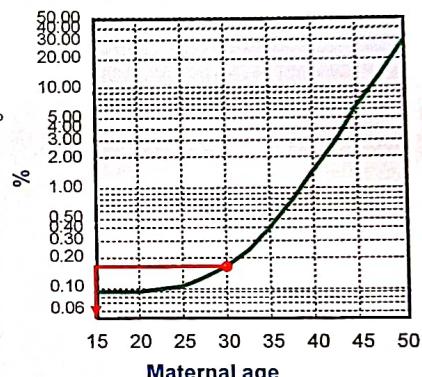
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



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CALYANI PANDEY / E79506-24-02-24-6 / 06/04/2024 / Visit No 3

ession

UTERINE GESTATION CORRESPONDING TO A GESTATIONAL AGE OF 11 WEEKS 4 DAYS

GESTATIONAL AGE ASSIGNED AS PER BIOMETRY (CRL)

ESTRUAL AGE 12 WEEKS 2 DAYS

AN UTERINE ARTERY PI IS NORMAL.

EDS FOLLOW-UP FOR ANOMALY SCAN AROUND 18-20 WKS.



SANDEEP PANSARE [MBBS, DMRE]

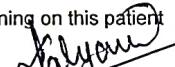
J. No 2002/03/973

FRG- Basic Course in Fetal Radiology and Genetic [MSBIRIA].

al Medicine Training by Scholar MD.

al Medicine Foundation [UK] ID - 143681, Certificates of competence in- Nuchal translucency, Nasal Bone, eclampsia screening and Cervical assessment.

clare that while undergoing ultrasonography / image scanning on this patient I have neither detected nor disclosed the sex of her foetus to anybody in any manner.)


DECLARATION OF PREGNANT WOMAN

clare that by undergoing ultrasonography / image scanning etc. I do not want to know the sex of my foetus.

signature / Thum impression of pregnant woman