

LMP, 19-11-2023

DOB : 10-12-1985

pho : 9505603450

Dr. G. TRIVENI

M.B.B.S., M.S.(Obgy.)
Obstetrician & Gynaecologist
Infertility Specialist
Regd. No. 52814

TRIVENI HOSPITAL
గ్రీన్ ల్యాండ్ హాస్పిటల్ గేటు ఎదురుగా, డాక్టర్స్ కాలనీ, నల్లగొండ

సంప్రదించు వేళలు :

ప్రసవశాల టైం గో. 10-00 నుండి రాత్రి గో. 7-00 వరకు
అధికారం టైం గో. 10-00 నుండి టైం గో. 2-00 వరకు

Cell: 7569550452, 6302900950

డా॥ జి. త్రివేణి

M.B.B.S., M.S., (Obgy)
ప్రసవశాల మరియు స్త్రీల వ్యాధి నిపుణురాలు
Regd. No. 52814

Pt's Name

రాజశాంబ దేవి VIII Bodangaparthi Age 35 Sex F

GPLAD

2 SNA 2 FTAUD 2

Date: 08/04/24

Valid Upto: 22/04/24

Wt : 60 kgs
Temp : 98.6 F
PR : 82mt
BP : 110/70mm/Hg
Heart : S1b (+)
Lungs : WAD

C/O cough & cold Hypothyroidism

PFM (+)

OLEAC-Fem
Aster

PR 80m

PA - ut 18-20cm

FHS (+)
elevated

Liq R

Ph. anes
Glu

LMP :

EDD :

S.EDD:

ML :

Consanguinity Yes/No.

Menstrual Periods:

Reg/Irregular

Dm - Not Done

22/4/24/25

1. T. Pano
1 - 159

2. T. Freon
1150

3. T. Calbid
+150

4. PC Prot prod
C malh

5. Syp Aleavit
100

amogich
1 - 110d

T. Azithral
1 - 50

T. Keer M
150

Syp Coffea - 15
100

T. Dolo 650mg
1 - 150

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① : 08682-234555



అపర్నా హాస్పిటల్ & స్కానింగ్ సెంటర్

(100 BEDDED MULTISPECIALITY NABH HOSPITAL)

Doctors Lane, Ansari Colony, Nalgonda.
డాక్టర్స్ లేన్, అన్సారి కాలనీ, నల్గొండ.

Moola Aparna Reddy

Reg. No. 51278

డా॥ మూల అపర్నా రెడ్డి

Reg. No. 51278

Pt NAME : FARZANA AGE: 35 Y/F

DATE: 08.04.2024

Ref by DR : TRIVENI MS OBG

INDICATION: TIFFA

OBSTETRIC ULTRA SOUND SCAN WITH TIFFA REPORT

Single live intrauterine gestation noted cephalic presentation at the time of scan
Fetal cardiac activity noted HR = 141 BPM
Fetal movements noted
Liquor is adequate, clear
Placenta is posterior grade - I maturity upper segment.
No e/o cord around the neck noted

FOETAL BIOMETRY

BPD	:	4.78cm	20 wks 3 days
HC	:	17.18cm	19 wks 5 days
AC	:	14.86cm	20 wks 1 days
FL	:	3.06 cm	19 wks 3 days
CGA	:	20 weeks 0 days	
EDD	:	26 / 08 / 2024	
EFW	:	316 gm +/- 46 gm.	
CX	:	3.1 cm , Internal os: normal	

Continue----

Note : The science of the radiological diagnosis is based on the interpretation of various shadows produced by both normal & abnormal tissue. Dissimilar diverse diseases produce similar shadows, hence this report is not for confirmation for the diagnosis and only represents part of professional opinion in some of the various possibilities and number of variables known & unknown does exist.

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డా॥ మూల అపర్నా రెడ్డి
Reg. No. 51278

TIFFA:

Head and neck:

Cerebellum, cisterna magna normal
Lateral cerebral ventricles are normal
Nuchal fold thickness normal

Face:

Orbit, nose and lips normal, PMT seen

Chest:

Heart 4 chamber view seen
Diaphragm, lungs normal

Abdomen:

Stomach bubble seen at left hypo chondrium with normal situs
Abdominal wall intact
Kidneys, bladder are normal
3 vessel cord with normal insertion noted

Spine: Normal

Extremities: Upper limbs & lower limbs are grossly appear normal

Both uterine arteries show normal colour flow & spectral pattern. No e/o end diastolic notches

IMPRESSION:

-Single live intrauterine gestation of 20 weeks 0 days gestational age +/- 2 weeks
With no obvious anomalies

Advised follow up scans to R/O progressive anomalies
Advised fetal echo

DR. R. APARNA
RADIOLOGIST

I Dr. R. APARNA declare that while conducting USG ON FARZANA 35 Y/F. I have neither detected nor disclosed the sex of the fetus to anybody in any manner. Determination of fetal sex is illegal (section PNDT ACT 1994).

Note: In spite of sincere search all anomalies cannot be ruled out by ultra sound, since assessment of fetal anomalies depends on fetal position, liquor volume, maternal obesity and period of gestation at the time of scan.
In BOH with HTN Doppler studies are helpful in evaluating IUGR & viability

All GIT abnormalities & small VSD, ASD, PDA cannot be ruled out with this scan

Note: The scan has its own limitations. Please correlate clinically. Thanks for referral
Ultra sound scan alone cannot exclude all genetic syndromes or chromosomal abnormalities
Hence USG has its own limitations. Please correlate clinically. Thanks for referral
normal Hence USG has its own limitations. Please correlate clinically. Thanks for referral
confirmation for the diagnosis and only represents part of professional opinion in some of the various possibilities and number of variables known & unknown does exist.

మంచి మనసుతో ఆలోచిద్దాం - మన ఇంటికి రాబోయే మహాలక్ష్మిని రక్షిద్దాం.

Hydrocodone

OTU

CMR: NK

SCMP: 19/11/23

SEND: 26/8/24
24/8/24 (3000 (1000))

ML: 19yr

NCA

MH: Red

CEB: 16yr

TSH: 0.14
62.54gpm