

PATIENT NAME	Mrs. Farheen Shaikh	Date:	18.04.2024
REFERRED BY:	Dr. Deydatta Kulkarni Sir	AGE:-	23 Yrs/ Female

OBSTETRIC USG

The real time, B mode & colour doppler sonography of gravid uterus was performed.

LMP : 01.12.2023

Gestational Age By LMP	19 wks 6 days	EDD BY LMP	06.09.2024
Gestational Age By USG	19 wks 3 days	EDD BY USG	09.09.2024

There is a single, live, intrauterine foetus, in changing presentation and lie.

Foetal Movements : Present.
Foetal Cardiac Pulsations : Present. FHR- 146 bpm

FOETAL PARAMETERS:

B.P.D.	4.54 cm.	19 wks 5 days	44 centile
Head Circumference	16.85 cm	19 wks 3 days	25 centile
Abdominal Circumference	13.66 cm.	19 wks 1 days	21 centile
Femur length	03.11 cm.	19 wks 5 days	35 centile

Extended Biometry:

Right Humerus	2.88 cm	19 wks 2 days	29 centile
Left Humerus	2.86 cm	19 wks 2 days	28 centile
Right Tibia	2.64 cm	19 wks 3 days	34 centile
Left Tibia	2.58 cm	19 wks 1 days	30 centile
Right Fibula	2.66 cm	19 wks 2 days	50 centile
Left Fibula	2.62 cm	19 wks 1 days	47 centile

Estimated Foetal Weight : 290 +/- 43 gms (21st centile).

Placenta : Anterior, No previa. Grade I Maturity.

Amniotic Fluid : Adequate.

Cervix Measures : 3.7 cm (Trans-Abdominal Assessment done).

Internal Os : Closed.

Gestational Age by USG is: 19 wks 03 days

Screening Uterine artery reveals PI :

Right Uterine artery	0.91	Mean PI of uterine arteries is about 1.04 which corresponds to 39 th centile and appears normal.
Left uterine artery	1.17	

FACILITIES

3D, 4D Ultra Sonography | Color Doppler | C.T. Scan, M.R.I., X-ray Reporting

Sex determination is illegal and unethical and not done in any manner.

माता, ग्राउंड फ्लोअर, आवेदकर शॉपिंग कॉम्प्लेक्स, रामोर, कोटक बँकच्या शेजारी, सुलाखे हायरस्कूल रोड, वारी, संपर्क - 9886638

ANOMALY (LEVEL II)

Fetal head: Midline falx is seen. Right lateral ventricle measures 5.7 mm, left lateral ventricle measures 5.9 mm. Both lateral ventricles appear normal. Trans-cerebellar diameter measures 20.8 mm. Cisterna magna measures 3.6 mm. Anterior complex, cavum septum pellucidum appears normal

Fetal spine: Entire spine is visualized in longitudinal and transverse planes. The vertebrae and spinal canal appear normal. No evidence of neural tube defect seen on present imaging.

Fetal neck: No cystic lesion is seen around the neck.

Fetal face: Both orbits, nose and lips appear normal. Orbito-orbital distance is 12 mm. No evidence of facial cleft.

Fetal thorax: Heart appears central with normal cardiac axis. Normal cardiac situs is seen. Four chamber view is normal. RVOT, LVOT appears normal. Both lungs are seen. No evidence of pleural/pericardial effusion.

Fetal abdomen: Abdominal situs appears normal. Stomach and bowel appear normal. No evidence of ascites. Abdominal wall is intact. Both kidneys appear normal. Urinary bladder is seen and appears normal. Mild hydronephrosis seen in both kidneys. Transverse diameter of renal pelvis measures 4 mm on either side.

Fetal extremities: All fetal long bones are visualized and appear normal for period of gestation. Hands and feet appear normal.

Three vessel cord is seen. Two umbilical arteries and single umbilical vein is seen.

Soft Markers :

1	Choroid Plexus cyst	Absent
2	Increased Nuckle fold Thickness	Absent
3	Fetal Ventriculomegaly	Absent
4	Echogenic Intra cardiac focus	Absent
5	Echogenic bowel loops	Absent
6	Shortened Fetal long bones	Absent
7	Renal Pyelectasis	Present ✓

IMPRESSION: Present USG study reveals,

1. Single, live, intrauterine gestation of age 19 weeks 03 days.
2. E.D.D. assigned as per LMP : 06.09.2024
3. EDD By Current USG Biometry: 09.09.2024
4. Endo-cervical length measures 3.7 cm. (Trans Abdominal assessment Done).
5. EFW is 290₊₋ 43 gms (21st centile).
6. Mild hydronephrosis seen in both kidneys. Transverse diameter of renal pelvis measures 4 mm on either side.
7. Screening uterine artery Doppler reveals: Uterine artery PI within normal limits. (Mean PI of uterine arteries: 1.04, 39th centile)
8. No obvious congenital structural anomaly is detected in present study.

Recommendation : Growth scan at 28 wks.

In this present study no obvious congenital anomaly was detected in the foetus. Serial monitoring is advised to r/o evolving congenital anomalies of face and heart.

Note: It must be noted that detailed foetal anatomy may not always be visible due to technical difficulties related to foetal position, fluid volume, foetal movements, and patient's abdominal wall thickness. Therefore all foetal anomalies may not necessarily be detected at every examination. Anomalies like Tracheo-esophageal fistula, very small VSD, Imperforate anus are difficult to be diagnosed on antenatal USG.

DECLARATION: I have neither detected nor disclosed the sex of the fetus to anyone in any manner.

NOTE: USG FINDINGS ARE TO BE CORRELATED WITH CLINICAL, LABORATORY AND OTHER INVESTIGATION FINDINGS FOR FINAL DIAGNOSIS AND FOR THEIR MANAGEMENT.


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RADIOLOGIST

3D, 4D Ultra Sonography | Color Doppler | C.T. Scan, M.R.I., X-ray Reporting
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तुळजाई, ग्राउंड फ्लोअर, ऑब्डकर शॉपिंग कॉम्प्लेक्स समोर, कोटक बँकच्या शेजारी सलाल बँडखाल सोनी सेक्टर 1, नवी मुंबई.