

डॉ. अंकिता विजयवर्गीय

एम. डी. बी. एस., डी. एम. आर. डी

एम. आर. आर्ट. फैलोशिप :

नानावटी हास्पिटल, मुंबई

हिंदुजा हास्पिटल, मुंबई

पॉर्ट एंड बालाजिस्ट :

फॉर्टिस हास्पिटल, नोएडा

जी. डी. बी. हास्पिटल, दिल्ली

रिजर्वी हास्पिटल लिमिटेड, कानपुर

जबाहर नाल बेहर बैंसर हास्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

FMF Certified from
Fetal Medicine Foundation
Reg. No. MP-8932

MRI FELLOWSHIPS :

- NANAVATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI

FORMER RADIOLOGIST AT:

- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR

• JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

PATIENT'S NAME : MRS. AENTI

AGE/SEX : 32Y/F

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS)

DATE : 01.05.2024

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 25.01.2024

GA(LMP):13wk 6d

EDD : 31.10.2024

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 164 beats /min.
- PLACENTA: is grade I, right antero-lateral & not low lying.
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR .
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 1.8 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 1.06)

FETAL GROWTH PARAMETERS

▪ CRL 75.5 mm	~	13	wks	5 days of gestation.
---------------	---	----	-----	----------------------

- Estimated gestational age is 13 weeks 5 days (+/- 1 week). EDD by USG : 01.11.2024
- Internal os closed. Cervical length is WNL (37.9 mm).
- Baseline screening of both uterine arteries was done with mean PI ~ 1.50 (WNL for gestation).
- Date of last delivery 22.09.2016 .
- Gestation at delivery of last pregnancy 42 weeks 1 days.

IMPRESSION:

- ➔ Single, live, intrauterine fetus of 13 weeks 5 days +/- 1 week.
- ➔ Gross fetal morphology is within normal limits.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (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 capabilities & limitations of this examination.)

(DR. ANKITA VIJAYVARGIYA)

First Trimester Screening Report

Urway Aenti

Date of birth : 04 September 1992, Examination date: 01 May 2024

Address: hno. 00, gehukheda kolar
road
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

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

Parity: 1; Deliveries at or after 37 weeks: 1.

Maternal weight: 51.0 kg; Height: 157.5 cm.

Maternal weight: 51.0 kg; Height: 157.5 cm. Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Preeclampsia in previous pregnancy: no; Previous small baby: small; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 25 January 2024

EDD by dates: 31 October 2024

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 13 weeks + 6 days from dates

EDD by scan: 31 October 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	164 bpm
Crown-rump length (CRL)	75.5 mm
Nuchal translucency (NT)	1.8 mm
Ductus Venosus PI	1.060
Placenta	high, right antero lateral
Amniotic fluid	normal
Cord	3 vessels

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.50	equivalent to 0.970 MoM
Mean Arterial Pressure:	77.7 mmHg	equivalent to 0.960 MoM
Endocervical length:	37.9 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 532	1: 8883
Trisomy 18	1: 1369	1: 7075
Trisomy 13	1: 4275	<1: 20000

First Trimester Screening Report

Preeclampsia before 34 weeks

1: 5891

Fetal growth restriction before 37 weeks

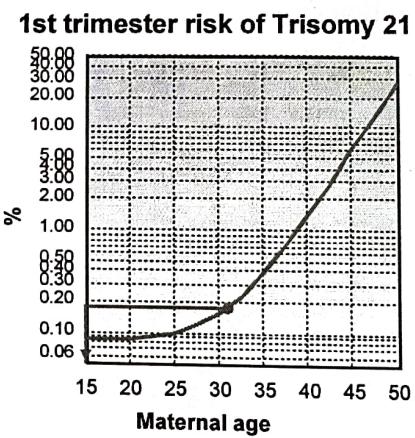
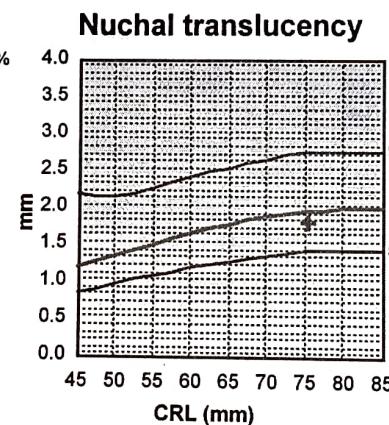
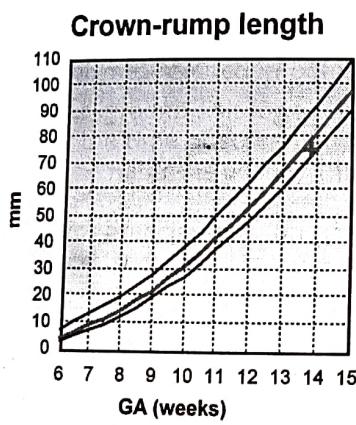
1: 294

The background risk for aneuploidies is based on maternal age (31 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, tricuspid Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

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).



(14)

mos - ~~Aerof~~ runway
Aerofie

321P

Double marker

weight - 58.0 kg -

height - 4.9 inch.

D.O.B - 04 - September - 1992



LOTUS HOSPITAL

Doctor's Record Sheet

Name of Patient Deeksha Iswary Age/Sex 32/F Reg. No.

Ward/Bed Surgeon I/C D/A

Provisional Diagnosis

Date :

Clinical Progress :

Wsh
S &
mab
gut
hur
Ad
Dome
nur
per

R

Treatment Advised :

Tab Doxycycline 200
Tab Fosfazin 100
Tab Triple analgesic
hans Mampat 1000 mg BID
Amoxicillin 1 month

1 month