

Better Diagnostics, Healthier Life

# DIAGNOSTICS

A Unit Of Gyani and Tiwari Research and Healthcare

Scan | C.T. Scan | Sonography | Echo Cardiography | Endoscopy | Pathology | X-Ray | ECG/EEG/TMT

NAME	MRS. HULSI SAHU	AGE / SEX	38YRS / F
REFD.BY	DR. CHETNA MAHESHWAR	DATE	01/05/2024

## TARGETED IMAGING FOR FETAL ANOMALIES SCAN (TIFFA) WITH 3D/4D

Uterus shows single live intrauterine fetus with changing presentation.

PLACENTA	anterior, away from os		
LIQUOR	Adequate		
FETAL CARDIAC ACTIVITY	Present	FHR	145 bpm
FETAL MOVEMENTS	Present		
PLACENTA	Present		
PRESENTATION	anterior		
UMBILICAL CORD	Cephalic		
INTERNAL OS	Two arteries, one vein		
CERVIX	closed		
Loop of cord around the neck present.			

### FETAL BIOMETRY:

BP	5.2 cm	21 wks 06 days
HC	19.2 cm	21 wks 03 days
AC	16.6 cm	21 wks 05 days
FL	3.5 cm	21 wks 03 days
HL	3.5 cm	22 wks 01 days
TIBIA	3.4 cm	22 wks 06 days
FIB	2.9 cm	20 wks 03 days
RADIUS	2.7 cm	20 wks 03 days
ULNA	3.2 cm	22 wks 04 days
AGA: 21 w 4 d		
Aug. Wt: 432 gm +/- 63 gms (49.4%)		
EDD (USG): 07/09/2024 +/- 15 DAYS		
EDD (LMP): 08/09/2024		

These reports are for assisting doctor, physician in their treatment and not for medico legal purpose and should be related clinical.



Better Diagnostics, Healthier Life

# DIAGNOSTICS

A Unit Of Gyani and Tiwari Research and Healthcare

3T M.R.I. Scan | C.T. Scan | Sonography | Echo Cardiography | Endoscopy | Pathology | X-Ray | ECG/EEG/ TMT

Cerebellum (TCD)	2.1 cm (20 w 03 d)
Cisterna magna	5.2 mm
Nuchal fold	4.2 mm
NASAL BONE	8.3 mm
IOD	0.9 cm
BOD	3.4 cm (21 wks. 06 days)

## FETAL ANATOMY:

HEAD	<ul style="list-style-type: none"> <li>➤ Midline falx is seen</li> <li>➤ Both lateral ventricles appear normal.</li> <li>➤ Posterior fossa, cerebellum, cisterna magna and vermis appear normal.</li> </ul>
NECK	<ul style="list-style-type: none"> <li>➤ Appear normal. No cystic lesion noted around the neck.</li> </ul>
SPINE	<ul style="list-style-type: none"> <li>➤ Entire spine is seen in longitudinal and transverse axis.</li> <li>➤ Vertebra and spinal canal appear normal</li> </ul>
FACE	<ul style="list-style-type: none"> <li>➤ Both orbits, hard palate, nose, lips and mandible appear normal.</li> </ul>
THORAX	<ul style="list-style-type: none"> <li>➤ Both lungs appear normal.</li> <li>➤ No e/o pleural or pericardial effusion seen</li> </ul>
HEART	<ul style="list-style-type: none"> <li>➤ Normal cardiac situs seen</li> <li>➤ Four chamber view, outflow tracts, three vessels trachea view appear normal.</li> </ul>
ABDOMEN	<ul style="list-style-type: none"> <li>➤ Abdominal situs is normal.</li> <li>➤ Liver &amp; gall bladder appear normal.</li> <li>➤ Abdominal wall is intact. No evidence of ascites</li> </ul>
KUB	<ul style="list-style-type: none"> <li>➤ Both kidneys and bladder appear normal.</li> </ul>
LIMBS	<ul style="list-style-type: none"> <li>➤ Four limbs with long bones appear normal.</li> </ul>

## SOFT MARKERS FOR TRISOMY 21:

Echogenic intracardiac foci	Absent
Pyelectasis	Absent
Increased nuchal fold thickness	Absent
Echogenic bowel	Absent
Absent / hypoplastic nasal bone	normal
Short femur	Absent
Short humerus	Absent
Ventriculomegaly	Absent

These reports are for assisting doctor, physician in their treatment and not for medico legal purpose and should be related clinical.

Better Diagnostics, Healthier Life

# DIAGNOSTICS

A Unit Of Gyani and Tiwari Research and Healthcare

Scan | C.T. Scan | Sonography | Echo Cardiography | Endoscopy | Pathology | X-Ray | ECG/EEG/ TMT

## FETAL DOPPLER STUDY:

UTERINE ARTERIES	PI	RI	NOTCH
Right	0.2	0.7	Absent
Left	1.2	0.6	Absent
Mean PI	0.7	Mean PI value is within normal limits	

### IMPRESSION:

- A single live fetus in changing lie with cephalic presentation at the time of scan. EGA as per today's ultrasound scan = 20 W 4 D
- EDD as per today's ultrasound scan = 07/09/2024
- The placenta is anterior.
- The liquor is adequate.
- No gross fetal anomaly seen in present scan.
- Loop of cord around the neck present.

### DISCLAIMER:

The sensitivity of USG has its limitation in detection of congenital anomalies because of moving fetal positions, fetal movements, maternal fat, adequacy of liquor, nature of abnormalities presenting at different fetal ages, overlapping fetal parts and the abnormalities that are not obvious morphologically detected. Certain defects may not be visualized during the 2nd trimester. A follow up scan in the early third trimester of late 2nd trimester is advisable. The present study cannot exclude fetal chromosomal abnormalities because the ultrasound markers for these may not always be evident. Present study does not include detailed fetal echo. Defects such as complex cardiac anomalies (like PAPVD), small VSDs, ASDs, evolving conditions etc, lower gastrointestinal abnormalities, abnormalities involving hands, feet, ears, soft tissues etc. may not be detected on ultrasound examination.

DECLARATION:- I DR. KALYANI WANI (M.D. Rad) declare what while conducting ultrasonography scanning on this patient. I have neither detected nor disclosed the sex of her foetus to anybody in any manner.



DR. KALYANI WANI  
MBBS (KEM HOSPITAL, MUMBAI)  
MD RADIODIAGNOSIS (GMCH, NAGPUR)  
EX-SENIOR RESIDENT (SION HOSPITAL, MUMBAI)  
CONSULTANT RADIOLOGIST

*These reports are for assisting doctor, physician in their treatment and not for medico legal purpose and should be related clinical.*



Better Diagnostics, Healthier Life

# DIAGNOSTICS

A Unit Of Gyani and Tiwari Research and Healthcare

MRI | C.T. Scan | Sonography | Echo Cardiography | Endoscopy | Pathology | X-Ray | ECG/EEG/ TMT

The REFERENCE VALUES OF SOFT MARKERS are as follows:-

echogenic intracardiac focus

positive LR: 5.83

negative LR: 0.8

isolated LR: 0.95

ventriculomegaly

positive LR: 27.5

negative LR: 0.94

isolated LR: 3.8

nuchal fold thickness >6 mm

positive LR: 23.3

negative LR: 0.8

isolated LR: 3.79

echogenic bowel

positive LR: 11.44

negative LR: 0.9

isolated LR: 1.65

hypoplastic/absent nasal bone

positive LR: 23.3

negative LR: 0.46

isolated LR: 6.58

shortened humerus

positive LR: 4.8

negative LR: 0.7

isolated LR: 0.78

mild pyelectasis

positive LR: 7.6

negative LR: 0.9

isolated LR: 1.08

shortened femur

positive LR: 3.72

negative LR: 0.8

isolated LR: 0.61

aberrant right subclavian artery (ARSA)

positive LR: 21.48

negative LR: 0.7

isolated LR: 3.9

In the presence of soft markers, the risk of Down syndrome is recalculated as new risk = baseline risk x likelihood ratio (LR). The new LR is calculated by multiplying all positive LR<sub>s</sub> (of markers present) and all negative LR<sub>s</sub> (of markers absent). Note: if a single marker is present, then isolated LR is considered. These reports are for existing doctor, physician in their treatment and not for medico legal purpose and should be related clinical.

(8) Mrs. Hulsi Sahu

Age - 38y1P

Quadruple Mother

DOB - 3/12/2024

CMP - 17/12/1986

Height - 5 feet

Weight - 60 KG