

Dr. Pooja Shrivastava

MBBS

MS (Obstetrics & Gynaecology)

Reg No. MP-4298

Trained In : Gynaecological Endoscopy Laparoscopy & Hysteroscopy, Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning



- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai.
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

Obstetrician & Gynaecologist

Consultation fee valid for 3 visits/15 days whichever is earlier in routine
10 hours only (Monday to Saturday)



Name : MRS. MEGHA PRAJAPATI

Age/Sex : 23 Years / Female

LH-A-009779

Address : Misrod

Mobile No.: 9669852558

Date : 1-May-2024

Wt 48.9 kg
BP 99/56
Pulse 96/mi-
Temp 97.6°F
Finger prick capillary ins x 7 days
metformin 1000 mg x 53
T21 Naform 00 100
Cat. Borealis 100
T21 Lysogum 100
T21 ensiprin 25 mg 100
Ayargin 500 mg 100
sweden 100
Isoniazid

Emergency Call : 9425005377

Email id : poojadr2003@gmail.com



LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal

Ph : 0755 4002222 6002222222 9285111350

Signature

M T W T F S

Page No.:

Date:

YOUVA

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Mrs - megha Pragapati 23/F

Double
marker

weight - 48.9 kg ,

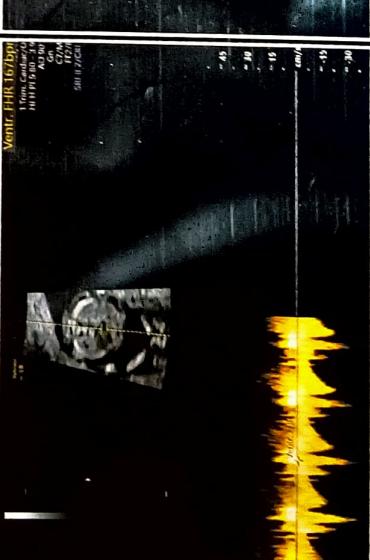
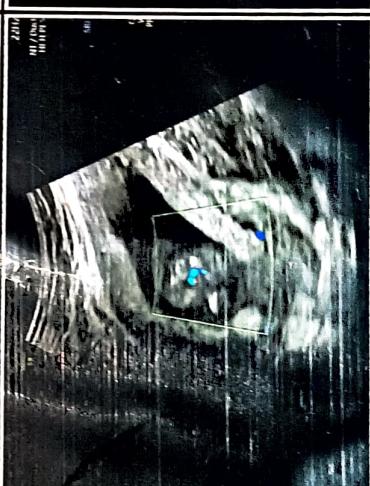
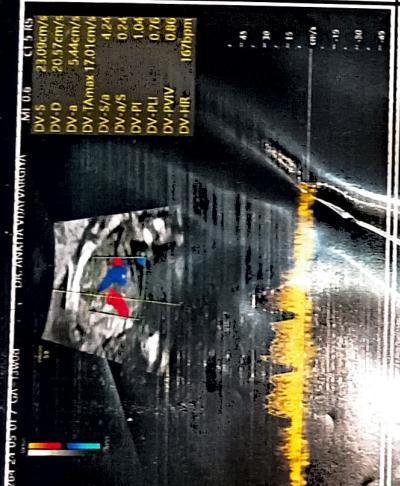
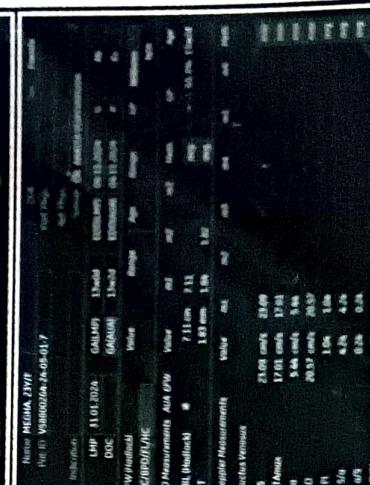
height - 4.11 m

DOB - 8 June 2001 .

WE CARE DIAGNOSTICS & IMAGING

Name : MEGHA, 23Y/F

01 May 2024



R. ANKITA VIJAYVARGIYA
MBBS, DMRD
Reg. No. MP-8932

PRIOR RADIOLOGIST AT:
ORTIS HOSPITAL, NOIDA
T.B HOSPITAL, DELHI
REGENCY HOSPITAL LTD, KANPUR
WAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL



FMF CERTIFIED FROM
FETAL MEDICINE FOUNDATION
• FOR NT/NB SCAN
• FOR PRE - ECLAMPSIA SCREENING
MRI FELLOWSHIPS :
• NANAVATI HOSPITAL, MUMBAI
• HINDUJA HOSPITAL, MUMBAI

PATIENT'S NAME : MRS. MEGHA

AGE/SEX : 23 Y/F

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

DATE : 01.05.2024

OBSTETRIC USG (EARLY ANOMALY SCAN) WITH PRE-ECLAMPSIA SCREENING

LMP: 31.01.2024

GA (LMP) : 13wk 0d

EDD : 06.11.2024

- Single live fetus seen in the intrauterine cavity in **variable** presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 167 beats /min.
- PLACENTA: is **grade I**, **anterior & 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 spectrum with positive "a" wave (PI ~ 1.04).

FETAL GROWTH PARAMETERS

CRL	71.1	mm	~	13	wks	2	days of gestation.
Estimated gestational age is 13 weeks 2 days (+/- 1 week). EDD by USG : 04.11.2024							
Internal os closed. Cervical length is WNL (37.2 mm).							
Baseline screening of both uterine arteries was done & reveals mean PI of ~ 2.32 (WNL for gestation)							

IMPRESSION:

- Single, live, intrauterine fetus of 13 weeks 2 days +/- 1 week.
- Gross fetal morphology is within normal limits.

Follow up at 19-20 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 abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

(DR. ANKITA VIJAYVARGIYA)

First Trimester Screening Report

PRAJAPATI MEGHA

Date of birth : 08 June 2001, Examination date: 01 May 2024

Address: H.NO. 12 PATEL MOHHALLA
MISROD BHOPAL
BHOPAL
INDIA

Referring doctor: DR. POOJA SHRIVASTAVA (MBBS, MS)

Maternal / Pregnancy Characteristics:

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

Parity: 0.

Maternal weight: 48.0 kg; Height: 149.9 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: don't know; Antiphospholipid syndrome: don't know; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 31 January 2024

EDD by dates: 06 November 2024

First Trimester Ultrasound:

US machine: voluson S8. Visualisation: good.

Gestational age: 13 weeks + 0 days from dates

EDD by scan: 06 November 2024

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	167 bpm	↔•↔
Crown-rump length (CRL)	71.1 mm	↔•↔
Nuchal translucency (NT)	1.8 mm	
Ductus Venosus PI	1.040	↔•↔
Placenta	anterior high	
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:	2.32	equivalent to 1.450 MoM
Mean Arterial Pressure:	87.8 mmHg	equivalent to 1.090 MoM
Endocervical length:	37.2 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 1060	<1: 20000
Trisomy 18	1: 2676	1: 14655
Trisomy 13	1: 8369	<1: 20000

First Trimester Screening Report

Preeclampsia before 34 weeks

1: 62

Fetal growth restriction before 37 weeks

1: 35

The background risk for aneuploidies is based on maternal age (22 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). The adjusted risk for PE < 34 weeks or the adjusted risk for FGR < 37 weeks is in the top 10% of the population. The patient may benefit from the prophylactic use of aspirin. 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).

