

First Trimester Screening Report

Wadhwani Sonam

Date of birth : 04 April 1996, Examination date: 11 May 2024

Address: hno. A -133, Lalita nagar
kolar road
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

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

Parity: 0.

Maternal weight: 55.0 kg; Height: 154.9 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 11 February 2024

EDD by dates: 17 November 2024

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 12 weeks + 6 days from dates

EDD by scan: 17 November 2024

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	159 bpm
Crown-rump length (CRL)	69.4 mm
Nuchal translucency (NT)	2.0 mm
Ductus Venosus PI	1.050
Placenta	posterior high
Amniotic fluid	normal
Cord	2 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.

Comments: single right umbilical artery.

Uterine artery PI:	1.13	equivalent to 0.710 MoM
Mean Arterial Pressure:	68.6 mmHg	equivalent to 0.830 MoM
Endocervical length:	30.6 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 806	1: 14454
Trisomy 18	1: 2021	1: 11202

आंकिता विजयवर्गीय

बी. बी. एम., डी. एम. आर. डी

आर आर्ट. फैलोशिप :

न्यू हॉस्पिटल, मुंबई

न्यू हॉस्पिटल, मुंबई

फैलोशिप्स :

न्यू हॉस्पिटल, नोएडा

बी. बी. हॉस्पिटल, दिल्ली

न्यू हॉस्पिटल लिमिटेड, कानपुर

राजस्थान नेहरू कैंसर हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

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

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

PATIENT'S NAME : MRS. SONAM

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

AGE/SEX : 27Y/F

DATE : 11.05.2024

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 11.02.2024 (Corrected according to dating scan) GA(LMP):12wk 6d EDD : 17.11.2024

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 159 beats /min.
- PLACENTA: is grade I, posterior & 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. 2 vessel cord is seen, possibly single right umbilical artery
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 2.0 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 1.05)

FETAL GROWTH PARAMETERS

• CRL 69.4 mm ~ 13 wks 1 days of gestation.

• Estimated gestational age is 13 weeks 1 days (+/- 1 week). EDD by USG : 15.11.2024

• Internal os closed. Cervical length is WNL (30.6 mm).

➤ Baseline screening of both uterine arteries was done with mean PI ~ 1.13 (WNL for gestation).

PRESSION:

- Single, live, intrauterine fetus of 13 weeks 1 days +/- 1 week.
- Single right umbilical artery. Rest of visualized 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 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)

11 MAY 2024

Re: hingyan (m)

BP - 104/69
Pulse - 104bpm
SpO2 - 98.1%
wt - 59.5kg

hingyan
has been sent to
Dawki for further
work and samples have
been sent

Re: ①, ②, ③



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Re: hingyan

WT → 55.3 kg

WT → 53.3, C → 54.4 → 5-Fut

9665 0618841m