TEST REQUISITION FORM (TRF)

NABL MC-3633

SPL CODE : SPLCGH020 MSP Pathlab **Date :** 20

S.No.:	Patient Name in Capital	Age/Sex	Test Code & Test Name	Sample Type	Barcode No.	Sample Collection Date & Time
1.	Mrs. Prachati	32	Dual marker	Serum	A0660670	
2.	Rai		Hight - 5.2			
3.			Weight - 50			
4.			LMP - 15/03/24			
5.			DOB - 6/02/1992			
			Mobile 9031729081			

* Note Attached Clinical Report If Required

PathCare Diagnostics
(A UNIT OF PATHCARE LABS PVT.LTD.)

MATERNAL SERUM SCREEN REQUISITION FORM

Dual Marker **(9.0-13.6 wks)** | Triple and Quad Marker **(14.0-22.6 wks)**

Patient Name : Mrs Prajakti Rai **Sample collection date :**

Vial ID : A0660670

Date of Birth (Day/Month/Year) : 6/2/1992

L.M.P. (Day/Month/Year) : 15/3/24

Gestational age by ultrasound (Weeks/days) : ___ **Date of Ultrasound :** 20/5/24

Nuchal thickness (in mm): _____ CRL (in mm) : _____ BPD : _____

Nasal bone (Present/Absent)

Ultrasound report : First trimester ○ Second trimester ○

Sonographer Name : _____

Weight(Kg): _____

Diabetic status : Yes ○ No ○

Smoking : Yes ○ No ○

Gestation : Single ○ Twins ○

Race : Asian ○ African ○ Caucasian ☐Others ○

IVF : Yes ○ No ○ **If Yes,** Own Eggs ○ Donor Eggs ○

If Donor Eggs, Egg Donor birth date : __/__/__

Previous pregnancies :

With Down Syndrome : Yes ○ No ○

With Neural tube Anomaly : Yes ○ No ○

Any other Chromosome anomaly : Yes ○ No ○

Data Filled by :

Shriji Sonography Centre

प्रथम तल F : 12-27, RAJIV PLAZA, OPP. DIST. HOSPITAL
BILASPUR 495 001 (C.G.) MOBILE : 9926275226

Dr. Shweta Andhare
MBBS, Dip. in Radiology
Consulting Radiologist
Reg. No. CGMC 1028/2007
PCPNT No. - 078

Name	PRAGATI RAI	Date	06/05/2024
Ref. By	: Dr B DUBEY MD	Age / Sex	:32Y /F
Patient ID	:		

OBSTETRIC SONOGRAPHY

The real time,B mode, sonography of gravid uterus was performed.
There is a single, intrauterine gestation.

L.M.P. : 15/03/2024 Gestational Age 7 WKS 3 D E.D.D. 20/12/2024

G SAC 24.2 MM COMPATIBLE WITH 7 WKS 3 DAYS

CRL 12.2 MM COMPATIBLE WITH 7 WKS 3 DAYS

FHR MEASURES 152/MIN..

YOLK SAC VISULIZED

FETAL POLE VISULIZED.

DECIDUAL REACTION IS GOOD AND ADEQUATE.

NO E/O SC BLEED NOTED.

:

INTERNAL OS CLOSED CERVICAL LENGTH MEASURES 3.6 CM.

IMPRESSION

- **SINGLE, LIVE , INTRAUTERINE GESTATION OF 7 WKS 3 DAYS .(+/- 2 wks).**
- **THE CORRECTED E.D.D. IS 20/12/2024 (+/- 2 wks.).**
- **RIGHT OVARIAN CYST OF SIZE 3.3 X 3.1 C M**

Thanks for reference

Dr. Shweta Andhare
DMRE
REG.NO CGMC 1028/2007