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Regd. No - OMC 17010/09

UHID : AM40370015	Encounter ID : 115207760001
Name : Mrs. Sushree Sangita Sahoo	Visit Date Time : 22/04/2024 12:19 pm
Age : 21 years 5 mon 14 days	CLinic : GYNAECOLOGY AND OBSTETRICS
Gender : Female	Visit Type : First Visit

Patient Vitals.

Temperature in °F : | Pulse : | Respiratory Rate : | Systolic BP : 110 | Diastolic BP : 70 | SpO2 : | Pain Assessment Score : 0 | Height : 156 | Weight : 45.8 | Allergy Present : No | Allergy Detail : | BMI : 18.82 |

Primigravida at 7w5d D.O.B = 08/11/2002.
LMP 28/2/24.

Mx 2yrs trying recently
prev. cycles regula

END - 6/12/24.

P/H - NS

? keloid tendency

F/H - NS

O/E Pelvic

BP - 110/70.

WT 45.8kg

P/A - Soft

Adv

T. DOXINATE OD at night
before sleeping

↓ If no relief (11am)

T. STEAMETIL MD three times
before food.

- Continue Folic 5mg all day

✓ T. RANTAC 150mg twice before
food for gastritis

Syp Digene 5ml after meal.

- Plenty of fluids (2.5-3L+)

- small frequent meals.

- [HIV HBsAg HCV, VDRL
(H+no)]

Blood sugar
F2mPP.

urine H+no, culture.

culture
- skin
containers

ENT / NB scan

↓
Double marker

Tue / Wednesday
Dr Sacheta

(15-22 May)

Kewee C-16

TSH-1.91

April

RAI-99.

USG 14/4.
6W4D.

SLIP

6W4D.

CL-3.52

TSH-1.91

Feb-11.7

PLT 3.3

22/4/24.

UHM-2-3PC/hft

Serology-NR

VDRL-NR

DATE	WEIGHT	URINE DIPSTIX	B.P.	GESTATIONAL AGE	SYMPHYSIO FUNDAL HEIGHT (CMS)	FHS	REMARKS AND RESULT
21/5/24	47.4		110/80	11W6D - Dates 12W3D (NT)	P/A	Wt not for Gable -	
					<u>Adv</u>		- Double necker. - low? TLUSG - 10 PM - 20wks -
							- July 2nd week - 24 TA - 0.5 w/p. - T. RICHARD CR 100mg oral dht - T. SUPRACAL HD oral dht - Plenty of fluids - Mamma posternex Sept mch
							- Linglow / <u>Brood</u> - for stretch marks <u>None</u>

Patient ID	: AM40370015	Patient Name	: Mrs. Sushree Sangita Sahoo
Gender	: Female	Age	: 21Y
Encounter ID	: 115373280001	Encounter Type	: Outpatient
Admission Date	: 21/05/2024 11:50	Discharge Date	:
Location	: Diagnostic Clinic	Bed Number	:
Specialty	: GENERAL	Admitting Practitioner	:
Examination Date	: 21/05/2024.	Attending Practitioner	: Dr Monica Gupta

NT SCAN(11-13+6 Weeks) SINGLE

LMP: 28.02.2024 EDD: 04.12.2024 Average gestational Age (as per LMP): 11 weeks 6 days.

CEDD: 30.11.2024 Average gestational age (as per USG): 12 weeks 3 days.

Single live intra-uterine fetus.

CRL measures 58.7 mm

Fetal heart rate appreciated (166 bpm).

CHROMOSOMAL MARKERS:-

Nuchal translucency 0.9 mm.

Nasal bone is present.

Ductus venous flow pattern: Normal-0.78 (Positive A Wave).

Tricuspid Doppler: Normal (No e/o Tricuspid regurgitation).

LIMITED STRUCTURAL ANOMALY SCAN:-

Skull / Brain: Normal

Spine: Normal

Heart: 4 Chamber view is normal.

Abdominal wall: Normal.

Cord insertion is normal.

Stomach: Visible

Urinary Bladder: Visible

Upper limbs: Visible

Lower limbs: Visible.

The cervical length appears normal (4.0cm).

Doppler:

Left uterine PI: 0.61

Right uterine PI: 0.75

No notch.

Mean PI: 0.680

Risks / Counseling:

Patient counseled and consent given.

Operator: Dr. Suchita Agarwal, FMF id: 178042

Condition	Background	Adjusted risk
Frisomy 21	1: 1059	<1:20000
Frisomy 18	1:2523	1: 13712

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Trisomy 13 1: 7931 <1: 20000
Fetal growth restriction before 37 weeks 1: 149
Spontaneous delivery before 34 weeks 1: 1449

Comments

There is a single viable intrauterine pregnancy.

The nuchal translucency measurement, nasal bone and fetal heart rate has reduced the maternal age related risk for chromosomal abnormalities from 1 in 1059 to <1 in 20000.

The nasal bone is present. The Tricuspid Value and Ductus Venosus Doppler are normal.

The uterine artery Doppler is normal for this gestation. The cervical length is 4.0cm with no evidence of funneling.

The detections rates for chromosomal abnormalities with various screening tests are as follow-

First trimester NT only – 75%

First trimester Combined (NT + maternal blood test)- 80-85%

Sequential Screening (Combined + Quadruple at 15-19w+Genetic sonogram at 18-20w) – 95%.

Maternal blood test for cell free fetal DNA – 99%

Invasive testing (CVS / Amniocentesis), which is the definite test has a procedure related risk of about 1:300.

Impression

- No obvious fetal defects.
- Normal uterine artery Doppler and cervical length.

I, Dr. Suchita Agarwal, declare that while conducting ultrasonography / image scanning on Mrs. Sushree Sangita Sahoo, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Radiologist Signature

Report Date & Time : 21/05/2024 14:36



Dr Suchita Agarwal

Fetal Medicine Consultant