



# TEST REQUISITION FORM (TRF)



SPL CODE :

SPL CG1020 MSP Pulhulab

Date : 24/10/21

Patient Name in Capital

Mrs. Preeti

Age/Sex

37

Test Code & Test Name

Quad Markers

Sample Type

serum 25165397

Barcode No.

Sample Collection Date & Time

Ref. Custom

Height - 5.1

Weight - 62

LMP - 8/02/2024

DOB - 20/05/1986

Mono -

\* Note Attached Clinical Report If Required

Dual Marker (9.0-13.6 wks)

Triple and Quad Marker (14.0-22.6 wks)

Patient Name : Mrs. Preeti Sample collection date :

Vial ID : 25165397

Date of Birth (Day/Month/Year) : 20/09/1986

L.M.P. (Day/Month/Year) : 8/2/2024

Gestational age by ultrasound (Weeks/days) : \_\_\_\_\_ Date of Ultrasound :   /  /  

Nuchal thickness (in mm): \_\_\_\_\_ CRL (in mm) : \_\_\_\_\_ BPD : \_\_\_\_\_

Nasal bone (Present/Absent)

Ultrasound report : First trimester ☒ Second trimester ☒

Sonographer Name : \_\_\_\_\_

Weight(Kg): 62

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 :**



NAME	PRITI
SEX/AGE	37 Y F
DATE	20.06.2024
REFERRED BY:	DR. NIHARIKA NAYAK

**OB - 2/3 Trimester scan Report ( Anamoly Scan )** Route - Transabdominal

(This Ultrasound is performed by high end 4D USG machine )

**Indications-** 10 - Detection or chromosomal abnormalities , fetal structures defects and other abnormalities.

L.M.P.- 08.02.2024	L.M.P. GA - 19 WEEKS 0 DAYS	L.M.P. EDD - 14.11.2024
	USG GA -19 WEEKS 0 DAYS	USG EDD - 14.11.2024

**Maternal -** Cervix length 3.7 cms .Internal Os is closed.

	PI	RI	<b>UTERINE ARTERIES</b> - show normal diastolic flow pattern with no early diastolic notching. <b>UMBILICAL ARTERY</b> - No resistance. Normal flow pattern.
UMBILICAL ARTERY	1.0	0.6	
RIGHT UTERINE ARTERY	0.9	0.6	
LEFT UTERINE ARTERY	0.8	0.5	
MEAN UTERINE ARTERY PI	0.85		

**Fetus Survey -**

- ± Single intrauterine live gestation.
- ± Foetal movement - ++ Visualized normal.
- ± Foetal cardiac activity - ++ Visualized normal. FHR - 140 bpm.
- ± Presentation - variable.
- ± Attitude - Flexion.

**Placenta**-posterior grade 0 maturity with lower limit well above internal os. Normal retroplacental hypoechoic zone and no evidence of retroplacental hematoma.

**Umbilical cord** - Two arteries and one vein .No cord abnormalities.

**Anmiotic fluid** - - Normal. Largest pocket - 4.2 cm.

**Dr. Priti Soni**  
MBBS, DMRD

Thanks for Reference

**Dr. Sameer Soni**  
MBBS, DMRD

ग्रोम सिटी के बाजू में, स्टेशन रोड, चाम्पा (छ.ग.) मो. 8103702780

**PRE-NATAL SEX  
DETERMINATION  
IS NOT DONE**

गर्भवती स्त्री की सोनोग्राफी करवाने हेतु स्वयं और पति का पहचान पत्र (आधार कार्ड/वोटर आईडी/राशन कार्ड) साथ लाना अनिवार्य  
ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRAY SCALE SHADES, AND IT IS ALSO AFFECTED BY TECHNICAL PITFALLS HENCE IT IS SUGGESTED TO CO-RELATE ULTRASOUND OBSERVATION WITH CLINICAL AND OTHER INVESTIGATIVE FINDINGS TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO-LEGAL PURPOSE



Save Tree  
Save Water

# DIAGNOSTIC CENT

PR Save Tree  
Save Water

TRIMESTER I

## Biometry (Hadlock)

Biparietal diameter	19 weeks 0 days
Head circumference	19 weeks 0 days
Abdominal circumference	19 weeks 1 days
Femur length	19 weeks 0 days

Estimated fetal weight according to AC, FL,

276 gms

Head	Cisterna magna normal. Midline falx seen. No identifiable intracranial lesion seen. Both lateral ventricles appeared normal. Posterior fossa appears normal.
Neck	Fetal neck appears normal.
Spine:	Entire spine visualized in longitudinal and transverse axis. Vertebrae and spinal canal appeared normal.
Face :	Fetal face seen in coronal and profile view , both orbit nose and mouth appear normal.
Heart	<b><u>APPEAR IN MID POSITION WITH APEX ON LEFT SIDE.</u></b> <b><u>FOUR CHAMBER PRESENT. DETAILS OF CARDIAC SCAN TO BE DONE IN 24 WEEKS -</u></b> <b><u>SUGGESTED FETAL ECHOCARDIOGRAPHY</u></b>
Abdomen	Abdomen situs appear normal. Stomach and bowel appear normal. Normal bowel pattern appropriate for gestation seen. No evidence of ascites. Abdominal wall intact.
KUB	Right and left kidney appear normal. Bladder appears normal.
Extremities	All fetal long bone visualized and appear normal for period of gestation.  Both feet and hand appear normal. Tibia , Humerus, Ulna, - Normal

Dr. Priti Soni  
MBBS, DMRD

Thanks for Reference

Dr. Sameer Soni  
MBBS, DMRD

ओम सिटी के छाजु में, बटेशन रोड, चाम्पा (छ.ग.) मो. 8103702780

PRE-NATAL SEX  
DETERMINATION  
IS NOT DONE

गर्भवती स्त्री की सोनोग्राफी करवाने हेतु स्वयं और पति का पहचान पत्र (आधार कार्ड/वोटर आईडी/राशन कार्ड) साथ लाना अनिवार्य है  
ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRAY SCALE SHADES, AND IT IS ALSO AFFECTED BY TECHNICAL  
PITFALLS HENCE IT IS SUGGESTED TO CO-RELATE ULTRASOUND OBSERVATION WITH CLINICAL AND OTHER INVESTIGATIVE  
FINDINGS TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO-LEGAL PURPOSE



2<sup>ND</sup> TRIMESTER RISK ASSESSMENT OF TRISOMY 21.

Increased nuchal fold	- absent
Absent or hypoplastic nasal bone.	- absent
Ventriculomegaly -	- absent
Short femur -	- absent
Pyelectasis .	- absent
Echogenic bowel.	- absent
Intracardiac echogenic focus	- absent

IMPRESSION :

SINGLE LIVE INTRAUTERINE FETUS OF 19 WEEKS 0 DAYS.

EDD BY USG - 14.11.2024

FETAL BIOMETRY S/O NORMAL FETAL GROWTH AS PER GESTATION.

LIQUOR - ADEQUATE .

FETAL ECHO CARDIOGRAPHY - SUGGESTED SCAN AT 24 TO 26 WEEKS.

ADV - FOLLOW UP USG.

[ All congenital anomalies cannot be detected sonographically & detection of abnormality may be dependent on the position of fetus at the time of scan. Fetal echo is not included in this study.]

-Suggested fetal Doppler at 26 to 28 weeks.

I, Dr. sameer Soni hereby declare that while conducting ultrasonography / imaging I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Form F has been obtained and preserved [under proviso to section 4 (3) rule 9 (4) and rule 10 (1A) of pre-conception and Pre-Natal Diagnostic Act, 1994 as amended till date].

Dr. Priti Soni  
MBBS, DMRD

Thanks for Reference

  
Dr. Sameer Soni  
MBBS, DMRD

ग्रोम बिटी के छाजु में, स्टेशन रोड, चाम्पा (छ.ग.) मो. 8103702780

PRE-NATAL SEX  
TERMINATION  
IS NOT DONE

गर्भवती स्त्री की सोनोग्राफी करवाने हेतु स्वयं और पति का पहचान पत्र (आधार कार्ड/वोटर आईडी/राशन कार्ड) साथ लाना अनिवार्य है।  
ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRAY SCALE SHADES, AND IT IS ALSO AFFECTED BY TECHNICAL PITFALLS. HENCE IT IS SUGGESTED TO CO-RELATE ULTRASOUND OBSERVATION WITH CLINICAL AND OTHER INVESTIGATIVE FINDINGS TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO-LEGAL PURPOSE