

# FOLLOW UP VISIT

Date: -19/06/24

Investigation if any

Treatment / Remarks / Advise if any

BP - paid  
110/80  
Wt - 60kg

Anomaly seen

Blood

Norm  
Mild pylectasis  
(Soft Mark  
of Abnormality)  
Quadruple  
Marker

- Rntail on

HLV- 3 OD x20d

my Tt  
2dme  
fakm

2

Follow Up Visit Date :

Treatment / Remarks / Advise if any

Rec  
01/03/24

WSY

SLF + 10W 6d

Fit R - 168 mte

EDD - 5/10/2024.

Rec  
18/03/24

- Rpt all ml.

Rec  
17/05/24  
wt 60 Kg  
BQ →

P/A

14 - 16W

Fit R - 142 mte

100% + 1.5 mte

Pq

WSY: (after 150 mte)

Anomney seen

①. Sanheme OD  
x 1 mte

①. Sencorn OD  
x 1 mte

①. Promet 300 SR / Gestexol 300 SR  
1st x 1 mte x 1 mte

- Tedaly 24 me / after 1st P<sup>led</sup>  
Tree 24 me



# Blue hills hospital & R.C



## SKELETAL:

## UMBILICAL CORD:

## CERVICAL CANAL:

## UTERINE ARTERIES:

Stomach in normal position. Bowel not dilated.  
**Both kidneys present. Pelvis of both kidneys are mildly dilated (4.8 mm on the right side & 5.7 mm on the left side).**  
Cord insertion site- normal.

No spinal defects or masses (transverse & sagittal views).  
Arms & hands present, normal relationships.  
Legs & feet present, normal relationships.  
Foot measures **4.79 cm.**

Three-vessel cord.

Normal in length & measures **5.6 cm.**

	PI
Right uterine artery	1.09
Left uterine artery	0.92
Mean	1.00 (normal)

## ANOMALY SCAN:

**Report summary:** Single live intrauterine pregnancy. Finding of today's scan explained to the prospective parts. They understand limitation of this screening test especially in detecting cardiac abnormalities. Please note fetal 2D cardiography is a different study.  
For detailed cardiac evaluation. Foetal echocardiography is recommended.  
Another ultrasound scan is recommended for foetal growth & placental localization at 32-34 weeks gestation or earlier if clinically indicated.

## Explained that:

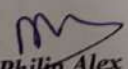
Ultrasound scanning cannot detect all fetal anomalies. Even though this scan has been performed as per current international guidelines for fetal imaging. Certain anomalies may go undetected due to technical limitation, maternal body habitus, unfavorable fetal position or abnormal amount of amniotic fluid. Overall detection rate of major congenital abnormalities in antenatal Ultrasound is about 70%. Some Congenital Abnormalities are seen by USG only in 3rd trimester. Thus, not detectable at 18-24 weeks scan. Antenatal ultrasonography screening test for structural abnormalities. It does not confirm or exclude chromosomal problems in the foetus. Assessment of small body parts like fingers, toes and ears does not come within the scope of the targeted anomaly scan. Subtle anomalies like mild facial dimorphisms, cleft of the posterior palate or small cardiac septal defects and anomalies that evolve towards later gestation may not be evident until after birth. All cases of tracheoesophageal fistula and imperforate anus are difficult to detect on prenatal scan considering its pitfalls in presentation.

**I declare that while conducting ultrasonography. I have neither detected nor disclosed the sex of her fetus to anybody in any manner.**

## IMPRESSION:-

- Single live intrauterine foetus of around 23 weeks 4 days +/- 2 weeks of gestational age.
- Mild fetal pyelectasis (UTD classification-A1)—Soft marker for aneuploidy.

Adv: Clinical Correlation and follow up scan & quadruple marker.

  
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MD, Radiology.

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BLUE HILLS  
HOSPITAL & RESEARCH CENTRE

# Blue hills hospital & R.C

DATE-19-Jun-24

NAME: MRS. RUSANA AKTAR

SEX: FEMALE

AGE: 27 YRS

REFERRED BY: DR. F. B. AMAN, MBBS, DGO (O & G).

NATURE OF U/S EXAMINATION: **ANOMALY SCAN (LEVEL-II).**

.....  
*Foetus: Single live intrauterine foetus of about 23 weeks 4 days +/- 2 weeks is seen in changing lie at present.*

- EDD by LMP: 26/10/2024.
- EDD by USG: 11/10/2024.

## FOETAL PARAMETERS:-

- Biparietal diameter:
- Head circumference:
- Abdominal circumference:
- Femur length:
- TIB:
- Humerus length:
- FIB:
- RAD:
- ULNA:
- Approximate foetal weight:
- Foetal heart rate:
- Placenta:
- Amniotic fluid:

5.62 cm (23 weeks 1 day).  
22.09 cm (24 weeks 1 day).  
19.33 cm (24 weeks 0 days).  
4.19 cm (23 weeks 4 days).  
3.70 cm (23 weeks 6 days).  
3.96 cm (23 weeks 5 days).  
3.44 cm.  
3.23 cm.  
3.36 cm.  
635 gm +/- 100 gm  
136 Bpm.  
Fundo body anterior (grade II maturity).  
Adequate (Single largest vertical pocket 4.7 cm).

## HEAD:

Intact cranium.  
Cavum septi pellucidum.  
Midline falx- present.  
Thalami- Present.  
Cerebral ventricles- lateral ventricle measures 4.2 mm.  
Cerebellum- Appears normal (measures 24.8 mm).  
Cisterna magna- Width measures 8.0 mm✓

## FACE:

Both orbits present.  
Median facial profile- normal appearance. NB present.  
Mouth present.  
Upper lip intact.

## NECK:

Absence of masses (e.g. cystic hygroma). NF thickness: 4.0 mm✓

## CHEST / HEART:

Normal appearing shape / size of chest & lungs.  
Heart activity present.  
Four chamber view of heart in normal position.  
Aortic & pulmonary outflow tracts- visualized.  
No evidence of diaphragmatic hernia.



DOB - 08.11.1995  
LMP - 29.01.2024  
Height - 5'11"  
Weight - 60kg

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