



TEST REQUISITION FORM (TRF)



Excellence In Health Care

SPL CODE : SPLC0020 MSP Perinatub

Date : 04/07/24

S.No.	Patient Name in Capital	Age/Sex	Test Code & Test Name	Sample Type	Barcode No.	Sample Collection Date & Time	Ref. Customer	Referral Doctor
1.	MEHA	23/f	Quad Marker	serum	A0660628			
2.	BHARDWAJ		Hight - 5.4					
3.			Weight - 58					
4.			LMP - 8/02/24					
5.			DOB - 25/04/201					
			MONO - 7000035098					

* Note Attached Clinical Report If Required

B. Dubey M.D

Dual Marker (9.0-13.6 wks)

Triple and Quad Marker (14.0-22.6 wks)

Patient Name : ANITA BHARDWAJ Sample collection date :

Vial ID : A0660628

Date of Birth (Day/Month/Year) : 29/4/201

L.M.P. (Day/Month/Year) : 8/2/24

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): 58

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 :



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NAME : MRS. NEHA BHARDWAJ

REF. BY: DR. PALLAVI SHARMA

Age/Sex: 23 Y/ F

DATE: 08/06/2024

ULTRASOUND ANOMALY SCAN

A single live foetus seen in uterine cavity with **Variable** presentation.

BPD 4.01 cm, 18 weeks 2 days.

HC 14.01 cm, 17 weeks 3 days.

AC 11.57 cm, 17 weeks 3 days.

FL 2.41 cm, 17 weeks 2 days.

Placenta posterior (Lower edge 5.0 cm from Os).

Haematoma of size(20-25 cc approx) noted along anterior the Os.

AFI Adequate.

LMP 08/02/2024

F. Wt 191 g (+/- 28 g), LMP Percentile 47 % (approx 3-97 %)

USG Percentile 23 % (approx 3-97 %)

F. HR 152 b/m regular

G.Age by LMP

17 weeks 2 days

EDD by LMP

14/11/2024

G.Age by USG

17 weeks 5 days

EDD by USG

11/11/2024

Correct EDD :14/11/2024 (as per NT/NB scan)

Cervical length -5.5 cm

FETAL ANATOMY :

HEAD:

Midline flux seen .

Posterior fossa appeared normal

No identifiable intracranial lesion seen .

Cisterna magna diameter - Normal (4.0 mm)

Transcerebellar diameter - Normal (16.1 mm)

Ventricle diameter at atria - Normal (4.7 mm)

IOD - 9 mm

NECK :

Fetal neck appeared normal .

SPINE :

Entire spine visualized in longitudinal and transverse axis.
Vertebrae and spinal appeared normal

FACE :

Fetal face seen in the coronal and profile views.
Both orbits , nose and mouth appeared normal .
Nuchal fold thickness – 2.5 mm
NB is normal (4.9 mm)

THORAX :

Both lungs seen.
No evidence of pleural or pericardial effusion.

HEART :

Heart appears in the mid position.
Normal cardiac situs. 4 chamber view normal.
Outflow tracts appeared normal

ABDOMEN:

Abdominal situs appeared normal .
Stomach and bowel pattern appropriate for the gestation seen .
No evidence of ascites .
Abdominal wall intact .

KUB :

Right and left kidneys appeared normal.
Bladder appeared normal

EXTREMITIES :

All fetal long bones visualized and appear normal for the period of gestation .
Both feet and hand appeared normal .

CORD : Umbilical cord is 2 A + 1V

PI value of right uterine artery -2.30

PI value of left uterine artery – 1.20

Mean PI value – 1.8 (raised)

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SONOGRAPHIC MARKERS FOR TRISOMY 21 (DOWN SYNDROME):

Nuchal fold thickness :	Normal .
Nasal bone present ,	Normal.
Ventriculomegaly :	Absent .
ARSA :	Absent .
Short femur :	Absent .
Echogenic intracardiac focus :	Absent .
Fetal hydronephrosis :	Absent .
Echogenic bowel :	Absent .

CONCLUSION:

- A) Single live intra uterine pregnancy MGA of 17 weeks 5 days with Variable presentation and AFI - Adequate.
- B) Placenta posterior (Lower edge 5.0 cm from Os).
- C) Haematoma of size(20-25 cc approx) noted along anterior the Os.
- D) F. Wt - 191 g (+/- 28 g).
- E) Correct EDD :14/11/2024 (as per NT/NB scan).
- F) Cervical length -5.5 cm.
- G) Raised mean PI value of uterine artery - HIGH RESISTANCE FLOW.

ADV: Quadruple marker test /Rescan after 3 weeks.

Disclaimer

All congenital anomalies may not be detected on USG.

I Dr. Smita Tiwari, declare that I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

DR SMITA TIWARI
MD RADIODIAGNOSIS

Rescan - 01/07/2024
→ RT uterine artery PI - 2.0
→ LT uterine artery PI - 1.4
→ mean PI value - 1.80 (Raised).
[Signature]