

617124

① Mrs. Damini Choudhary
Ae- 23712

Quadruple Marker

DOB - 14/7/2002

UMP - 29/2/2024

Height - "5" feet

Weight - 53.7 kg

NAME	DAMINI CHOUDHARY	AGE	21 YRS.	SEX:	F
REF. BY.	DR. MANASI GULATI	DATE:	05.07.2024	REG. NO.	B050724/142

TYPED BY: POONAM KORRAM

USG OBSTETRICS WITH TARGETED IMAGING FOR FOETAL ANOMALIES

Single live intrauterine fetus with variable presentation is seen at the time of examination.

Liquor is adequate in amount. Deepest amniotic pockets measures 4.7 cm.

Cervical length- 4.1 cm.

The cardiac pulsations and fetal movements are well seen.

The fetal heart rate is = **157** b/minute.

The approximate gestational age is as follows:

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PARAMETER	MEASUREMENT IN CM	WEEKS	DAYS
BPD	4.37	19	2
HC	15.97	18	6
AC	14.21	19	4
FL	2.65	18	0
TIB	2.54	19	0
FIB	2.39	18	2
HL	2.90	19	3
RAD	2.57	19	4
ULNA	2.70	19	6

ULNA	2.70		
Trans cerebellar diameter	19.7 mm		
Cisterna magna	3.1 mm		
Nuchal fold thickness	3.8 mm		
Lateral ventricle	6.1 mm	Inter orbital diameter	10.7 mm
Intra orbital diameter	10.4 mm		

Cephalic index = WNL.

Placenta- Posterior, Grade - I.

Extra orbital diameter

Cephalic index = WNL.

Placenta- Posterior, Grade - I.

Bilateral Uterine Arteries Are Showing Normal Wave Form And Doppler Indices. Diastolic Notch Is Absent. (Right uterine artery PI- 0.9, Left uterine artery PI- 0.7).

Mean uterine PI- 0.8, (6 percentile for the gestational age by USG - normal).

P.T.O.

Bilateral Uterine Arteries Are Showing Normal Wave Form.
Absent. (Right uterine artery PI- 0.9, Left uterine artery PI- 0.7).
Mean uterine PI- 0.8, (6 percentile for the gestational age by USG - normal).

P.T.O.

athological findings. These opinions are merely opinion and the final diagnosis as they are based on available auto generated/imaging finding. These opinions should be correlated with clinical findings. If insufficient Specimen quality is Unacceptable Specimen quality is Incomplete. If insufficient Specimen quality is Incomplete, the final diagnosis should be based on the same parameters as the specimen quality. If required.

Life Care



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31 MRI, 128 Cardiac CT Scan, 4D USG, DR Xray, BMD, CBCT, Endoscopy, X-ray Mammography

Fetal Blood Sample Collection From Home, 24x7 Service

TEST REPORT

NAME	DAMINI CHOUDHARY	AGE	21 YRS.	SEX:	F
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TARGETED IMAGING FOR FETAL ANOMALIES

Fetal Anatomy:-

Head:-

Osterna magna Midline falx seen. Both lateral ventricles appeared normal. Posterior fossa appeared normal. No identifiable intracranial lesion seen. Cavum septum pellucidum is normal.

Neck:-

Fetal neck appeared normal.

Spine:-

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

Face:-

Fetal face seen in the coronal and profile views. Both orbits, nose (nasal bone measures 5.3 mm) and mouth appeared normal.

Thorax:-

Both lungs seen. No evidence of pleural or pericardial effusion. No evidence of SOL in the thorax.

Heart:-

Echogenic intracardiac focus measuring ~2.1 mm is seen in left ventricle. Four chamber view normal.

Abdomen:-

Abdominal situs appeared normal. Stomach and bowel appeared normal. Normal 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 appeared normal

P.T.O.

Medical Interpretation/Radiological impression are merely opinion and the final diagnosis will be based on available auto generated/imaging finding. These opinions should be correlated with clinical history. A review of further evaluation may be sought whenever considered appropriate. It is requested that a final report be sent for the purpose of reporting on the same parameters. If required, the report may be sent to the patient's home address. The report may be sent to the patient's home address. The report may be sent to the patient's home address.

TEST REPORT

NAME	DAMINI CHOUDHARY	AGE	21 YRS.	SEX:	F
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Estimated foetal weight is 262 Gms +/- 38 gms.

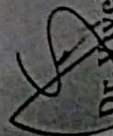
GA(AUA) - 19 wks + 0 days
EDD (AUA) - 29.11.2024
GA (LMP) - 18 wks + 1 days
EDD(LMP) - 05.12.2024

IMPRESSION:-

- ❖ Single live intrauterine pregnancy in variable presentation is seen at the time of examination of 19 weeks + 0 days.
 - ❖ Echogenic intracardiac focus in fetal left ventricle.
- Advice: - Fetal echocardiography for better evaluation of fetal heart and biochemical markers correlation.**

Note :- I Dr. Vivek Kumar Soni: Declare that while conducting USG of Mrs. Damini choudhary, I have neither detected nor disclosed the sex of her fetus to any body in any manner.

- ✓ (All measurement including foetal weight is subject to statistical variation. Fetal echo is not done.)
- ✓ Not all anomalies can be detected on sonography. Detection of anomalies is dependent on fetal position, gestational age. Maternal abdominal obesity and other technical parameters. Fetal limb anomalies not always detectable due to position. Follow up scanning and second opinion are always advisable.
- ✓ Fetal heart is grossly normal in current screening, all cardiac deformities can't be ruled out on this study and a dedicated fetal echocardiography is recommended, in case of clinical suspicion and a strong relevant history of genetic presence and maternal medications.
- ✓ Fetal medicine is dynamic process any fetal disease can present any time as changing dynamic process.

	Dr. Vivek Kumar Soni MBBS., Mq. Consultant Radiologist	Dr. Ujjwal Nigam MBBS, D.N.B. Consultant Radiologist	Dr. Abhishek Das MBBS., MD. Consultant Radiologist	Dr. Sonal Goyal MBBS., MD. Consultant Radiologist
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These reports are for assisting doctors, physicians in their treatment and not for medico legal purpose and should be related clinically.

Medical Investigation/Radiological impression are merely opinion and the final diagnosis as they are based on available auto generated imaging finding. These opinions should be correlated with clinical findings, a review of further evaluation may be sought whenever considered appropriate.
It is presumed that the Specimen belongs to the patient named in the test request form. A test request might not be performed for following reasons: a. Insufficient Specimen quality b. Unacceptable Specimen quality c. Incorrect type of test cancelled either on request of patient or because of incorrect code. It is expected that a fresh specimen will be sent for the purpose of reporting on the same parameters(S). If required.