

## Complete Obstetric Examination Report

### Jonali Devi

Date of birth: 25 July 2002  
Referring doctor: Dr Diganta Chetia

Patient Id: 11488  
Hospital Id:

### Present Pregnancy

Dates last period: 27/11/2023  
Cycle regular - LMP sure  
Conception spontaneous  
EDD by dates 02/09/2024  
EDD by scan 02/09/2024  
Weight 60.0 kg  
Height 166.0 cm  
Body mass index 21.8  
Cigarettes no  
Alcohol no

### Obstetric History

Gravida 1 Para 0

### Chronic Disease

Chronic hypertension no  
Thyroid disease

### Family History

on patient's side  
Diabetes Mellitus yes

### Examination

Date 18/05/2024  
Time 14:25  
Department Pratiksha Fetal Medicine Unit  
Routine, Second trimester Screening

### Indication

### Ultrasound

Operator Dr.Chowhan S; Fetal Medicine Consultant  
US system GE Voluson E8  
transabdominal  
View good  
Gestational age 24 weeks + 5 days

### Biometry / Anatomy

BPD 60.1 mm	▪	▪
OFD 77.9 mm	▪	▪
HC 216.8 mm	▪	▪
CM 7.3 mm	▪	▪
TCD 27.4 mm	▪	▪
Ventricular atrium 4.4 mm	▪	▪
TAD 59.5 mm	▪	▪
APAD 59.1 mm	▪	▪
AC 186.3 mm	▪	▪
FL 44.7 mm	▪	▪
BPD / OFD 0.77	▪	▪
HC/AC 1.16	▪	▪

Page 1 of 3 printed on 18 May 2024. Jonali Devi examined on 18 May 2024.  
Reporting on astraia software

BPD / FL 1.34

Estimated fetal weight: Hadlock (BPD-HC-AC-FL)

650 g

1 lbs 6 oz

Centile 14.5

Fetal heart activity visualised

Fetal movements normal

Fetal heart rate 150 bpm

Presentation: cephalic dorso-anterior

Placenta site: posterior high, Placenta grade: Grannum 0

Amniotic fluid normal

Cord 3 vessels

normal skull shape

hemispheres, ventricles mid-brain and posterior fossa appear normal

Vp left: 4.6 mm

Vp right: 4.4 mm

no facial cleft and the eyes, nose and mandible appear normal

Left ear: 23.0 mm

Right ear: 21.0 mm

Nasal bone: 4.9 mm

Prenasal thickness: 3.1 mm

no spine bifida or kyphoscoliosis

no skin oedema or cystic hygroma

Nuchal fold thickness: 3.9 mm

no abdominal wall defect

stomach and GIT appear normal

Comments: PAMC seen

kidneys and bladder appear normal

L. Pelvis A-P: 2.0 mm

R. Pelvis A-P: 2.0 mm

hands, feet, arms, legs and joints appear normal

**Extremities**
**Genitalia**

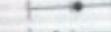
not examined

**Doppler ultrasound**
**Uterine artery**

PI left: 0.490



PI right: 1.010



Mean PI: 0.750



RI left: 0.38



RI right: 0.61



Notch: no notch

**Cervical assessment**

Cervix length: 28.0 mm

Funnelling: no

**Comments**

There is a single umbilical artery noted.

Fetal growth and amniotic fluid are normal.

The nasal bone is normal, measuring 4.9 mm.

There are no obvious structural defects or significant markers for chromosomal abnormalities.

**Fetal heart could not be completed due to persistent unfavourable position of the fetus despite multiple sittings. Suggest rescan after 1 week for completion of the scan.**

The detection rate of Down syndrome in second trimester scan is 75%. I have explained to the mother / couple that absence of markers for Down syndrome does not rule out the same.

The definitive test to study the fetal chromosome is by invasive testing, which carries a procedure related risk of miscarriage of about 1:500.

(All GI abnormalities may not be detected antenatally)

The uterine artery PI is normal. The cervical length measures (29 mm) with no funnelling.

The placenta is on the posterior high wall of the uterus and the lower edge of the placenta is 7 cm away from internal os.

For appointments and pregnancy outcome, kindly refer to this website - [www.drchowhan.com](http://www.drchowhan.com)

**Please note: All fetal abnormalities cannot be detected by ultrasound. Small VSD, PDA, ASD etc cannot be detected on scan.**

I, Dr. Chowhan S, declare that while conducting ultrasonography/ image scanning on Mrs. Jonali, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Dr Chowhan S, Fetal Medicine Consultant  
Obstetrician & Gynaecologist  
Fellowship in Fetal Medicine (BFMC, Bangalore)  
Fetal Medicine Foundation (FMF UK, Certified)  
FMF Operator ID: 139221

**(Please consult your Obstetrician with report)**

21/5/24

Fetal cardiac scan showed a normally connected heart with no obvious defects and normal flow patterns.