

(46) 96 - Shagda yadav Sec 31/5

Available
marks or 0

Weight - 60.2 kg
Height - 5'12" Fm ch
DOB - 03-09-1993

Pooja Shrivastava

Obstetrics & Gynaecology
No. MP-4298

In : Gynaecological Endoscopy Laparoscopy & Hysteroscopy. Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning



- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasonography, Wadla Hospital Mumbai.
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

Obstetrician & Gynaecologist

Consultation fee valid for 3 visits/15 days whichever is earlier in routine
Oppd hours only (Monday to Saturday)



Name : MRS. SHARDA YADAV	Age/Sex : 31 Years / Female	LH-A-002396
Address : 195 Ishan Western Kolar Road Bhopal	Mobile No.: 9753988737	Date : 4-Sep-2024

MRD 10/08

Adr
Obstetric
NBS lab

Q

Adr
Obstetric
NBS lab
Q

Revis
Report

P

TAT Cetgynae 10/08 60.24
28

Sys 100/100 mm Hg 28

TAT. Nauram 10/08

Sys 100/100 mm Hg

Sys Cetgynae 10/08

Sys Margar 10/08

Q

10/08

Emergency Call : 9425005377

Email Id : poojadr2003@gmail.com



Lotus Hospital

LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhopal

Ph.: 0755-4093322, 6262093322 8085441332

Signature

Time:- 1:00pm To 3:00pm & 6:00pm To 8:00pm

आंकिता विजयवर्गीय

म. डॉ. एस. डॉ. एम. आर. डॉ

मार आई. फैलोशिप :

टी हॉस्पिटल, मुंबई

हॉस्पिटल, मुंबई

डियोलाजिस्ट :

हॉस्पिटल, नोएडा

हॉस्पिटल लिमिटेड, दिल्ली

लाल नेहरू कैंसर हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

MRI FELLOWSHIPS :

- NANAVATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI

FMF Certified from
Fetal Medicine Foundation

Reg. No. MP-8932

FORMER RADIOLOGIST AT:

- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

PATIENT'S NAME : MRS. SHARDA

AGE/SEX : 31Y/F

REF. BY : DR. POOJA SHRIVASTAVA (MBBS, MS)

DATE : 05.09.2024

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 04.06.2024

GA(LMP):13wk 2d

EDD : 11.03.2025

- Single live fetus seen in the intrauterine cavity in **variable** presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 156 beats /min.
- PLACENTA: is grade I, left -lateral & not low lying.
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR .
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 2.2 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~ 0.64)

FETAL GROWTH PARAMETERS

CRL	69.2 mm	~	13 wks	1 days of gestation.
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- Estimated gestational age is **13 weeks 1 days** (+/- 1 week). EDD by USG : 12.03.2025
- Internal os closed. Cervical length is WNL (38.1 mm).

➤ Baseline screening of both uterine arteries was done with mean PI ~ 1.80 (WNL for gestation).

➤ Date of last delivery **03.09.2020** .

➤ Gestation at delivery of last pregnancy **40 weeks 1 days**.

IMPRESSION:

- ➔ Single, live, intrauterine fetus of **13 weeks 1 days** +/- 1 week.
- ➔ Gross fetal morphology is within normal limits.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

 (DR. ANKITA VIJAYVARGIYA)

First Trimester Screening Report

Yadav Sharda

Date of birth : 02 January 1993, Examination date: 05 September 2024

Address: hno. dk-5/11, danish kunj
kolar road
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 2; Deliveries at or after 37 weeks: 2.

Maternal weight: 60.0 kg; Height: 157.5 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Preeclampsia in previous pregnancy: no; Previous small baby: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 04 June 2024

EDD by dates: 11 March 2025

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 13 weeks + 2 days from dates

EDD by scan: 11 March 2025

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	156 bpm	—————●—————
Crown-rump length (CRL)	69.2 mm	—————●—————
Nuchal translucency (NT)	2.2 mm	
Ductus Venosus PI	0.640	●——————————
Placenta	high, left-lateral	
Amniotic fluid	normal	
Cord	3 vessels	

Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.80	equivalent to 1.150 MoM
Mean Arterial Pressure:	71.9 mmHg	equivalent to 0.860 MoM
Endocervical length:	38.1 mm	

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 523	1: 6434
Trisomy 18	1: 1308	1: 6961
Trisomy 13	1: 4095	<1: 20000
Preeclampsia before 34 weeks		1: 6668

First Trimester Screening Report

1: 290

Fetal growth restriction before 37 weeks

The background risk for aneuploidies is based on maternal age (31 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, tricuspid Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).

