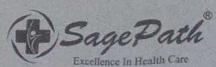




NABL
NC-3833

TEST REQUISITION FORM (TRF)



Excellence In Health Care

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.	Shruti	27/6	Dual Marker serum	A0660070				
2.	Neelam		Height - 5.8					
3.	SHRUTI		weight - 60					
4.			LMP - 27/06/24					
5.			DOB - 25/01/1997					
			MOMO - 9617831244					

* Note: Attached Clinical Report is Required



PRENATAL SCREENING REQUEST FORM

First Trimester (Dual Marker 9.0-13.6 wks) Triple and Quad Marker (14.0-22.6 wks)

Patient Name : SHRUTI ACHARWAL Sample collection date :

Vial ID : 00660070

Date of Birth (Day/Month/Year) : 23/01/1997

Weight (Kg) : 60

L.M.P. (Day/Month/Year) : 23/06/84

Gestational age by ultrasound (Weeks/days) : _____ Date of Ultrasound : ___/___/___

Nuchal Translucency(NT) (in mm) : _____ CRL (in mm) : _____ BPD : _____

Nasal bone (Present/Absent)

Ultrasound report : First trimester Second trimester

Sonographer Name : _____

Diabetic status : Yes No

Smoking : Yes No

No.of Fetuses : 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

Signature :

Shriji Sonography Centre

प्रथम तला F : 12-27, RAJIV PLAZA, OPP. DIST. HOSPITAL
BILASPUR 495 001 (C.G.) MOBILE : 9926275226



Dr. Shweta Andhare

M.S.B.S. D.O. in Radiology
Consulting Radiologist
Reg. No. CGMC 1028/2007
PDM No. - 076

Name : SHRUTI AGARWAL
Ref. By : Dr B DUBEY MD
Patient ID :

Date : 28/08/2024
Age / Sex : 27Y/F

OBSTETRIC SONOGRAPHY

The real time, B mode, sonography of gravid uterus was performed.
There is a single, intrauterine gestation.

L.M.P. : 27/06/2024 Gestational Age 8 WKS 6 D E.D.D. 03/04/2025

G SAC 35.9 MM COMPATIBLE WITH 8 WKS 5 DAYS

CRL 22.9 MM COMPATIBLE WITH 8 WKS 5 DAYS

FHR MEASURES 127/MIN..

YOLK SAC VISULIZED

FETAL POLE VISULIZED.

DECIDUAL REACTION IS GOOD AND ADEQUATE.

NO E/O SC BLEED NOTED.

INTERNAL OS CLOSED CERVICAL LENGTH MEASURES 3.7 CM.

IMPRESSION

- SINGLE, LIVE, INTRAUTERINE GESTATION OF 8 WKS 5 DAYS. (+/- 2 wks).
- THE CORRECTED E.D.D. IS 04/04/2025 (+/- 2 wks.).

Thanks for reference

Dr. Shweta Andhare
DMRE
REG. NO. CGMC 1028/2007

ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRADE SCALE SHADES, AND IT IS ALSO AFFECTED BY TECHNICAL PITFALLS, HENCE IT IS SUGGESTED TO CO-RELATE ULTRASOUND OBSERVATIONS WITH CLINICAL AND OTHER INVESTIGATIVE FINDING TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO LEGAL PURPOSE.

PRE-NATAL SEX DETERMINATION IS NOT DONE