

9.

one premise south

35411

Double

marker

WST  $\rightarrow$  69.2 kg

Height  $\rightarrow$  5.2 m

D.OB  $\rightarrow$  16/08/1989

17 SEP 2024

BP 120/75

Pulse 94/min

69.2 kg

o Gas Cessation 10:00

Body  
Temp

TA Thyroxine 100 mg

Temp 97.6-1

o Tab Wogon 100

o TA Bocal 500 mg 100

2 L Low Harper 100 mg  
3mg

o TA Nausea 00 100  
100

10 L

Adh  
Double  
mark  
400

2



# डॉ. अंकिता विजयवर्गीय

बी. बी. एस., डी. एम. आर. डी  
आर. आई. फेलोशिप :  
नावटी हॉस्पिटल, मुंबई  
जा हॉस्पिटल, मुंबई  
रेडियोलॉजिस्ट :  
टैस हॉस्पिटल, नोएडा  
टी. बी. हॉस्पिटल, दिल्ली  
सी हॉस्पिटल लिमिटेड, कानपुर  
हर 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. PRAMILA

AGE/SEX : 35Y/F

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

DATE : 17.09.2024

### OBSTETRIC USG ( EARLY ANOMALY SCAN )

LMP: 18.06.2024

GA(LMP):13wk 0d

EDD : 25.03.2025

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 171 beats /min.
- PLACENTA: is grade I, posterior & 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.
- Both orbits & lens seen. No intrathoracic mass seen. 4 chamber heart 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 1.9 mm ( WNL ).
- Ductus venosus shows normal flow & spectrum with positive "a" wave ( PI ~ 1.04 )

#### FETAL GROWTH PARAMETERS

- |   |
|---|
| ▪ CRL 70.1 mm ~ 13 wks 1 days of gestation. |
|---|

- Estimated gestational age is 13 weeks 1 days (+/- 1 week). EDD by USG : 24.03.2025
- Internal os closed. Cervical length is WNL ( 34.4 mm ).
- Baseline screening of both uterine arteries was done with mean PI ~ 2.64 ( High for gestation ) Suggests increased chances for PIH / Pre-eclampsia .
- Date of last delivery 05.10.2020
- Gestation at delivery of last pregnancy 39 weeks 4 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

Singh Pramila

Date of birth : 16 August 1989, Examination date: 17 September 2024

Address: hno. 09, d- kwalitey paradise  
near girdhar parisar  
Bhopal  
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

## Maternal / Pregnancy Characteristics:

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

Parity: 1; Deliveries at or after 37 weeks: 1.

Maternal weight: 69.1 kg; Height: 152.4 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: 18 June 2024

EDD by dates: 25 March 2025

## First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 13 weeks + 0 days from dates

EDD by scan: 25 March 2025

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	171 bpm
Crown-rump length (CRL)	70.1 mm
Nuchal translucency (NT)	1.9 mm
Ductus Venosus PI	1.040
Placenta	posterior high
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; both orbits & lens seen. No intrathoracic mass seen. 4 chamber heart seen. No TR.

Uterine artery PI: 2.64 equivalent to 1.720 MoM

Mean Arterial Pressure: 83.3 mmHg equivalent to 0.970 MoM

Endocervical length: 34.4 mm

## Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 274	1: 5406
Trisomy 18	1: 690	1: 3802
Trisomy 13	1: 2158	1: 2083