



भारत सरकार
Government of India



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नगिना अमीर पठान
Nagina Amir Pathan
जन्म तारीख/DOB: 01/01/2004
महिला/ FEMALE

8653 9871 2874

VID : 9199 5934 9828 6786

माझे आधार, माझी ओळख

SHREE SAI SONOGRAPHY CENTRE

DEVGAON (RANGARI) TQ. KANNAD DIST. AURANGABAD
DEVGAON (RANGARI)

Phone No: 9822316328

Patient ID: 2024090235

Name: Mrs. Shahista Hamir Pathan

Sex: F

Age: 20

Date: 17-Sep-2024

Study: OBSTETRIC

Ref By: Dr. Bhagyashri Ahirrao Madam

OBSTETRIC US

E/o single live intrauterine pregnancy with **Breech presentation** and lie.
Internal OS is closed and **cervical length is 30 mm**, no fluid in canal.

Placenta is Posteriorly central cord attachment homogenous texture ...

Liquor is adequate for this gestation.
Movements and cardiac activity regular.

Cardiac acceleration with movements appears normal
Fetal head, body & limbs well seen.

Biometry

B.P.D.	22 mm	13 wks 05 days
H.C.	83 mm	13 wks 04 days
A.C.	64 mm	13 wks 01 days
F.L.	09 mm	13 wks 00 days
N.T.	1.8 mm	

Average US gestational maturity 13 wks 02 days

EDD BY USG 23/03/2025 EDD BY LMP 20/03/2025 EFW 69 GMS

OPINION - 13 wk 02 day live intrauterine gestation with Breech Presentation.

Adv- Anamoly scan.

Note:- All anamolies are not detected due to liquor, foetal presentation, maternal abdominal thickness and various limitation at the time of scanning.

I (DR. Nilesh Ahirrao) neither detected the sex of the foetus at the of time of scanning nor disclosed the same to anybody in any manner.


Dr. Nilesh Kanhaiyalal Ahirrao
Shree Sai Sonography Center Devgaon (R.)
Dr. Nilesh Ahirrao
Reg. No. 89, MCI, Reg. No. 2002/03/984

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Dr. Nilesh Ahirrao



FREE SAI SONOGRAPHY CENTRE
DEVGAON (RANGARI) TO, KANNAD DIST. AURANGABAD
DEVGAON (RANGARI)
Phone No: 9822316128

Date: 02-Sep-2024

Dr. Ameer Pathan

FORM F
IN RESPECT OF PREGNANT
CENTER

02-Sep-2024

PATIENT'S HISTORY AND CLINICAL FINDINGS

NAME: _____ G: 2 P: 1 L: 1

Obstetric: _____ E.D.D.: 23/2/27

L.M.P. 8

M/H: *by Anne Tost Dady*

INVESTIGATIONS

Blood Group _____ RH Factor _____

HB% _____ gms % VDBI _____

HIV _____ (All)

GTT _____ Urine } Sugar

HBsAg _____ TORCH _____

ULTRASONOGRAPHY 1) _____

2) _____

3) _____

ANTENATAL RECORD

[illegible]