



# Rathi Sonography & Doppler Centre

Dr. Nikita C. Rathi (Kabra)

MBBS (Gold Medalist, GMC, Nagpur)

MD Radiodiagnosis (GMC, Chh. Sambhajinagar)

Fellowship in Fetal Medicine (Scholar MD)

Certified by Fetal Medicine Foundation, London, UK.

• Ultrasonography • Colour Doppler • Obstetric Scan • 3D/4D Scan • Amniocentesis • Chorionic Villus Sampling

Name: Mrs. Rekha Nilesh Sonar	Date: 13/09/2024
Ref.By. Dr. Varsha Kakade Madam	Age : 36Y/F

## USG OBSTETRICS SECOND TRIMESTER (ANOMALY SCAN)

EDD as per dating scan: 22/01/2025

Gestational age as per dating scan: 21wks 2days

Patient is counselled and informed about importance and limitations of this scan.

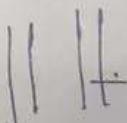
Poor sound penetration due to maternal body habitus.

- Single live fetus with changing presentation.
- Fetal activity present.
- Cardiac activity present. FHR 164bpm, normal and regular.
- **Fetal parameters:**

Biparietal diameter.	BPD	45mm	19wks 6d
Head circumference.	HC	177mm	20wks 2d
Abdominal circumference.	AC	158mm	21wks 0d
Femur length	FL	37mm	22wks 0d
Tibial length	TL	33mm	22wks 3d
Humerus length	HL	37mm	22wks 6d

- **Placenta:** in upper segment, fundo posterior.  
Thickness is normal.  
No retroplacental clot.
- Amniotic fluid is adequate for the gestational age.  
Single deepest vertical pocket measures 4.7cm.
- Cervix is 42mm in length. Internal os is closed.

Estimated fetal weight according to BPD,HC,AC,FL:410 +/-60gm.



### FETAL SURVEY

**ANEUPLOIDY MARKERS:** Both nasal bones seen. Nuchal fold thickness normal.

**HEAD & NECK:** Midline falx seen. Both lateral ventricles appear normal. Posterior fossa normal.

No identifiable intracranial lesion noted. Cisterna Magna appears normal.

Transcerebellar diameter normal. Interorbital diameter normal.

**FACE:** Both orbits, nose and lips appear normal.

**SPINE:** Entire spine normal. No evidence of open neural tube defect.

**THORAX:** Both lungs appear normal. No evidence of pleural or pericardial effusion. No evidence of SOL in lung.



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**HEART:** Normal situs noted. Four-chamber and five chamber view appear normal. Outflow tracts appear normal. Three vessel view appears normal.

**ABDOMEN:** Abdominal situs appears normal. Stomach bubble is persistently small in size ms 14 x 6 x 7mm (L x AP x ML) seen. No evidence of ascitis.

**KUB:** Both kidneys appear normal. No dilatation of pelvicalyceal system.

Urinary bladder seen. 3-vessel cord seen.

**LIMBS:** Both upper & lower limbs identified with 12 long bones, two hands & two feet.

**DOPPLER PARAMETERS:**

VESSEL	PI	COMMENT
Right uterine artery	1	
Left uterine artery	1	
Mean uterine artery	1	43 percentile

**IMPRESSION:** Poor sound penetration due to maternal body habitus.

- Single live intrauterine gestation with changing presentation corresponding to a gestational age of 21wks 2days (gestational age assigned as per dating scan).
- EDD: 22/01/2025 (as per dating scan).
- Persistently small sized stomach bubble (apparently isolated finding at present.)
- No evidence of fetal growth restriction.
- No evidence of any ultrasonographically detectable structural anomaly in present scan.

**Comment:** Persistently small sized stomach bubble (indirect evidence) has association with esophageal atresia (EA) with or without tracheo-esophageal fistula (TOF). However in present scan no obvious esophageal pouch (direct evidence) or other signs of EA/TOF noted (polyhydramnios). But these findings may evolve with advancing gestation.

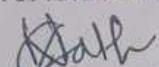
**Suggest follow up scan at 2-3 weeks.**

**Thanks for referral,**

**Disclaimer:** All anomalies cannot be picked up on antenatal scan due fetal presentation, fetal age, amount of liquor, maternal body habitus etc.

This scan does not include 2D fetal echocardiography report.

**Declaration-** I, Dr Nikita Rathi (Kabra), has neither detected nor revealed sex of fetus during sonography examination of the patient.

  
Dr. Nikita Rathi (Kabra)

Reg No. 2015/06/3873

(FMF certified, FMF ID:204605)

15 days.

28 wks

DATE \_\_\_/\_\_\_/\_\_\_

सौ. रव्या निलेश सानार

वजन - 55 \*

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