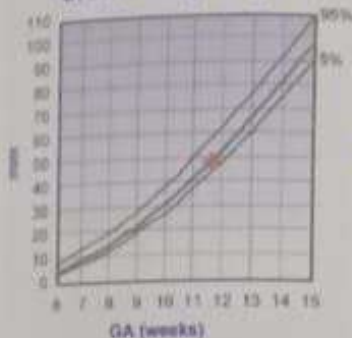


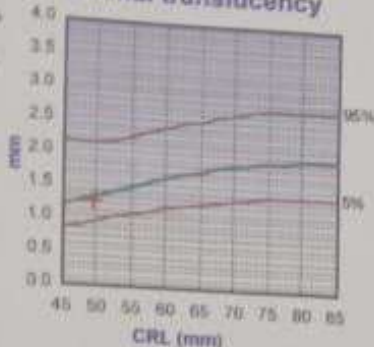




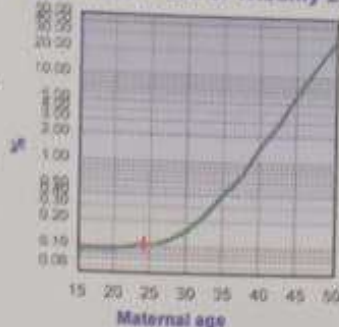
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



Fetus	Risk estimate - NT
	1 in 3514

CONCLUSION:

- Single live intrauterine fetus of 11 weeks 4 days.
- NT- 1.3 mm. Normal uterine artery doppler study.
- Please correlate with dual marker test.

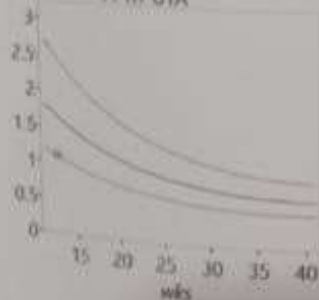
Please note that all anomalies can not be detected all the times due to various technical and circumstantial reasons like gestation period, fetal position, quantity of liquor etc. The present study can not completely confirm presence or absence of any or all the congenital anomalies in the fetus which may be detected on post natal period.

I, Dr. Rajlaxmi Deokar declare that while conducting sonography on MANKAR URMILA, I have neither detected nor disclosed the sex of the fetus to anybody in any manner.

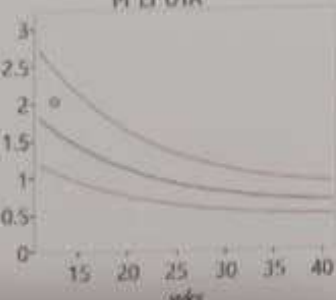
Rajlaxmi Deokar

Dr. Rajlaxmi Deokar,
MBBS DMRD DNB (Radio-Diagnosis)
Consultant Radiologist

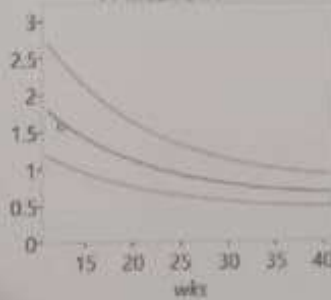
PI RT UTA



PI LT UTA



PI Mean UTA



**SURYA**

DIAGNOSTICS

CT SCAN | X-RAY | SONOGRAPHY
PATH LAB | ECG | BMD | STRESS TEST

The embryonal growth parameters are as follow:

	mm	Weeks	Days
Crown Rump Length:	49.3	11	4
Heart Rate:	162 Beats Per Minute		
Embryo attains 40 weeks of age on:	10/04/2025		
Nuchal Translucency	1.3 mm 40%	+-----+	
Nasal Bone	2.8 mm 40.5%	+-----+	
Upper and lower Limbs, Premaxillary triangle integrity, Urinary bladder, Stomach	Seen		
Ductus venosus waveform	Normal waveform Pattern		

Fetal aneuploidy screening:

Nasal bone ossification is seen. Facial profile appears normal.
Ductus venosus shows normal flow. Stomach bubble is seen.
There is no evidence of tricuspid regurgitation.

Fetal anatomical survey:

Fetal brain shows normal appearance of both lateral ventricles.
Bilateral choroid plexuses appear normal.
Midline falx is seen. Calvarial ossification is normal.
Normal intra cranial translucency is noted.
Spine appears normal with no obvious neural tube defect.
All four limb buds are visualized.
Umbilical cord insertion appears normal.



SURYA
DIAGNOSTICS
NANDED CITY, PUNE

CT SCAN | X-RAY | SONOGRAPHY
PATH LAB | ECG | BMD | STRESS TEST

Patient Name: MANKAR URMILA	Date: 23/09/2024
Ref Phy: DR. ASHA HOL	Age/Sex: 24 Years / FEMALE

USG OBSTETRICS NT SCAN

LMP: 27-06-2024		GA (LMP): 12w4d		EDD by LMP: 03-04-2025
LMP		GA		EDD
Dating		Weeks	Days	BY USG
By LMP	LMP: 27/06/2024	12	4	08/04/2025
By USG		11	4	
AGREED DATING IS (BASED ON USG)				

There is a single live intra uterine gestation.

The fetal cardiac activity is well seen.

Placenta is - ANTERIOR. It is not low lying.

Amniotic fluid is adequate.

Internal os is closed and length of cervix is normal - 35 mm.

UTERINE ARTERY DOPPLER

Vessels	S/D	RI	PI	PI percentile	Remarks
Right uterine artery	2.6	0.62	1.09	5%	Normal Mean PI
Left uterine artery	4.7	0.78	2.03	79%	
Ductus venosus					Psy= normal waveform pattern