

Mrs Vijay Laxmi Sahu
Age - 29 / Female

Dr - Pratibha Archana Das
(obs & coun)

Tell Quadruple mor/ser

Height - 5'2", ~~weight~~
Weight - 62 kg DOB - 13/5/1996

Dr. Harpal Singh

M.B.B.S., D.M.R.D. (Mumbai)

Reg. No. : C.G.M.C. 1195/07

Sunday Closed

Consultant Radiologist, Sonologist
Ex. Registrar - Nair & Nanawati Hospital, Mumbai

Ph. : 07759-227700, M : 9893254400

--Reporting Time : 10 AM to 6 PM--

Name :	VIJAY LAXMI SAHU	Date :	14-10-2024
Ref. By Dr. :	PRATIBHA A. DAS, MD [NTPC]	Age/Sex :	29 / F

OBSTETRICS SONOGRAPHY

(LEVEL 2 / ANOMOLY SCAN)

LMP: 12/05/2024 GA 22 WKS 01 DYS EDD 16/02/2025

OBSERVATIONS:

- There is a single, live, normal intrauterine gestation.
- Foetal Movements : (++) Visualised normal
- Foetal Cardiac Pulsation's : (++) Visualised normal. HR: 147 B/min.
- Presentation : Vertex
- Lie : Longitudinal.
- Attitude : Flexion
- Foetal Spine : Anterior & Right of Maternal spine.

FOETAL PARAMETERS:

- B.P.D. : 52.9 mm. compatible with 22 wks. 0 dys.
- Femur Length : 38.7 mm. compatible with 22 wks. 3 dys.
- Head Circumference : 194 mm. compatible with 21 wks. 5 dys.
- Abdominal Circumference : 161 mm. compatible with 21 wks. 2 dys.
- ESTIMATED FOETAL WEIGHT** : $>> 454 \pm 5\% <<$ gms. (By two formulas).

PLACENTA : $>>$ It is in upper segment located Posteriorly & shows grade II Maturity.

AMNIOTIC FLUID : Adequate for Gestational age (AFIS = 14.2 PRESENTLY)

Cervix : Normal.

EVALUATION FOR FOETAL ANOMALIES:

HEAD

The falx cerebri is in the mid line. Both lateral ventricles are normal in size. Posterior fossa is normal. No intracranial lesion seen.

SPINE

Entire spine visualised in longitudinal and transverse axis. Vertebrae and spinal canal are normal.

FACE

Fetal face is seen in the coronal and profile views. Both orbits, nose and mouth appeared normal.

THORAX

Heart is in the mid position. Normal cardiac situs. Four chamber view normal. Outflow tracts appears normal. Both lungs seen. No Effusion.

ABDOMEN

Abdominal situs appears normal. Stomach, bladder and both foetal kidneys appear normal. No evidence of foetal ascites.

EXTREMITIES

All fetal long bones visualised. No abnormality is noted in the foetal limbs.

◆ IMPRESSION >

- SINGLE, LIVE, NORMAL, INTRAUTERINE GESTATION OF SONAR AGE 21-22 WKS (± 1 WEEK)
- THE SONAR AGE CORRESPONDS TO THE G. AGE (BY L.M.P.)
- THE **ASSIGNED EDD** IS 16/02/2025 (± 1 WEEK)
- NO OBVIOUS FOETAL ANOMALIES ARE SEEN.

NOTE-

- THE SCIENCE OF RADIOLOGICAL DIAGNOSIS IS BASED ON THE INTERPRETATION OF VARIOUS SHADOWS PRODUCED BY BOTH THE NORMAL AND ABNORMAL TISSUES AND ARE NOT ALWAYS CONCLUSIVE.
- RADIOLOGICAL DIAGNOSIS IS NOT A TISSUE DIAGNOSIS AND IS RATHER A PROFESSIONAL INTERPRETATION OF THE IMAGES OF THE TISSUES PRODUCED BY SONOGRAPHIC INSTRUMENTS (SUBJECT TO TECHNICAL PITFALLS AND LIMITATIONS) TO HELP DOCTORS / CLINICIANS FOR BETTER PATIENT MANAGEMENT.
- CLINICAL CORRELATION IS MANDATORY FOR REACHING THE FINAL IMPRESSION NOT FOR MEDICOLEGAL PURPOSE.

DECLARATION :- I, DR. HARPAL SINGH, DECLARE THAT WHILE CONDUCTING ULTRASOUND ON THE ABOVE PATIENT, I HAVE NOT DETECTED NOR DISCLOSED THE SEX OF HER FETUS, TO HER OR ANYBODY, IN ANY MANNER, AS PER "MCD ACT, 94" (RULE 10/A) & HON'BLE SUPREME COURT GUIDELINES.

Thanks for the referral

PLEASE CORRELATE WITH CLINICAL & OTHER LAB. FINDINGS.

CONSULTANT RADIOLOGIST & SONOLOGIST



ALL FETAL ANOMALIES CAN NOT BE DETECTED BY SONOGRAPHY AND DETECTION OF FOETAL ANOMALIES DEPENDS ON CLINICAL AND SONOGRAPHIC FINDINGS. MEASUREMENTS ARE SUBJECT TO STANDARD STATISTICAL VARIATION.

ABDOMEN:

The cord insertion in the anterior abdominal wall is well seen. The stomach is noted in the abdomen. Urinary bladder is visualized. Two umbilical arteries seen.

EXTREMITIES:

Visualized upper limbs and lower limbs are normal bilaterally.

UTERINE ARTERY SCREENING DOPPLER:

- **UTERINE ARTERY DOPPLER:** THE MEAN UTERINE ARTERY PI IS RAISED 3.08 .
LT UT ARTERY PI IS 2.26 , NOTCH > PRESENT.
RT UT ARTERY PI IS 3.89 , NOTCH > PRESENT.

◆ **IMPRESSION >**

- THERE IS A SINGLE, LIVE, NORMAL, INTRAUTERINE GESTATION OF (SONAR AGE) 12 WKS 03 DAYS .
- THE SONAR AGE CORRESPONDS TO THE G. AGE (BY L.M.P.).
- THE **ASSIGNED EDD** IS 22/03/2025 (\pm 1 WEEK)
- NO OBVIOUS **STRUCTURAL DEFECTS / GENETIC MARKERS** NOTED AT THIS STAGE.

SUGGEST: TARGETED FETAL ANOMALY SCAN AT 18-20 WEEKS.

SUGGEST: DOUBLE MARKER BLOOD TEST .

NOTE-

- THE SCIENCE OF RADIOLOGICAL DIAGNOSIS IS BASED ON THE INTERPRETATION OF VARIOUS SHADOWS PRODUCED BY BOTH THE NORMAL AND ABNORMAL TISSUES AND ARE NOT ALWAYS CONCLUSIVE .
- RADIOLOGICAL DIAGNOSIS IS NOT A TISSUE DIAGNOSIS AND IS RATHER A PROFESSIONAL INTERPRETATION OF THE IMAGES OF THE TISSUES BY SOPHISTICATED INSTRUMENTS (SUBJECT TO TECHNICAL PITFALLS AND LIMITATIONS) TO HELP DOCTORS / CLINICIANS FOR BETTER PATIENT MANAGEMENT .
- CLINICAL CORRELATION IS MANDATORY FOR REACHING THE FINAL IMPRESSION. NOT FOR MEDICOLEGAL PURPOSE.

DECLARATION :- I, DR. HARPAL SINGH DECLARE THAT WHILE CONDUCTING ULTRASOUND ON THE ABOVE PATIENT I HAVE NEITHER DETECTED NOR DISCLOSED THE SEX OF HER FETUS, TO HER OR ANYBODY ELSE IN ANY MANNER AS PER 'PNDT ACT, 94' (RULE 10/A) & HONBLE SUPREME COURT GUIDELINES.

Thanks for the referral

PLEASE CORRELATE WITH CLINICAL & OTHER LAB. FINDINGS.

DR. HARPAL SINGH
MUMBAI

CONSULTANT RADIOLOGIST & SONOLOGIST

N.B: ALL THE FOETAL ANOMALIES CAN NOT BE DETECTED BY SONOGRAPHY AND DETECTION OF FOETA