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Visiting Doctor, Regd. No. Assam-17112



**EMMANUEL
RURAL HOSPITAL**

We Treat, God Heals.

O. P. D.
REGISTRATION TIMINGS
08:30 A.M. - 02:00 P.M.

SUNDAY CLOSED
Emergency 24 Hrs.

(License No. SHA/451)
P.O. Pailapool

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7352

Patient Name : **MRS MUNNI KARMAKAR**
Guardian Name : CHANDRA KARMAKAR
Doctor Name : Dr. M. Lamina Singh
City/District : CACHAR
Address : LABOC

UHID : **EC-3990**
Patient Contact : 7099974314
Age/Gender : **39Y/ Female**
Patient Category : **GENERAL P**
Date & Time : 19/10/2024 10:26 AM

cf. Precious Baby 10+0 Wt - 38kg
4 1/2 months pregnancy BB - 110/60
Marriage 6 yrs. 15yr. LMP 1/5 from
Lives short - 3 days. 1st 8/2/2023
Arrange 2 unit blood 1. 1st
Pallor (+ve) Uter 12/3/2023

- ① T. Ironin Hb — (no) 1hr 00
- ② T. Aim Cal — (no) 1hr 00
- ③ T. Indigrit 2008n — (no) 1hr 00
- ④ Syf. Hemfu — @ 2m
- ⑤ Syf. Mache — @ 2hr 00m
- ⑥ T. Bif be — @ 1hr 00m

Please bring this PRESCRIPTION on your next visit.

JESUS said, "Come unto me, all ye that labour and are heavy laden & I will give you rest." Matt. 11:28.

TSH
CBC
RMS
Amoat
TSH
Chin R. H. H.
USG Scanning

Anomaly
Scan
Hospital
Marker



Report: USG GRAVID UTERUS (Anomaly scan not done)

Patient Name: Mrs . Munni Karmakar

Age: 39 Yrs

Date: 21 October 2024

Sex: Female

Ward/Room: OPD

Referred by: Dr. Catherine Devi

Single live intrauterine fetus in **variable presentation at the time of examination.**

Fetal parameters are as follows:

Gestational age by USG: 19 weeks 4 days +/- 1 week.

- BPD: 4.47 cm.
- HC: 16.77 cm.
- AC: 14.46 cm.
- FL: 2.84 cm.
- F.H.R: 159 BPM.
- E.F.W: 287 Gram.
- EDD (by USG): 12/03/2025
- LMP: 01/05/2024
- EDD (by LMP):08/02/2025

Placenta is posteriorly low lying maturity grade I.

Liquor is adequate for the period of gestation.

No cord seen around the neck (at the time of examination).

Fetal cardiac and somatic activities are normal. Active fetus is seen.

Cervix is normal in length. Internal os is closed.

Impression:

- **Single live intrauterine pregnancy at approx 19 weeks 4 days +/- 1 week of gestation.**

Adv: Clinical correlation and further evaluation.


Radiologist signature

N.B: In case any discrepancy error or typing errors please get it rectified immediately.