

Date : / /

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Mr. Rohit Patel 26 yrs male

Mr. Rohit

DOB : 08/02/1998

Weight  $\rightarrow$  53.1 kg

Height  $\rightarrow$  5.2

06 NOV 2024

B.P - 110/62

Pulse - 101 b.p

SpO<sub>2</sub> - 99%

Temp - 97.4in

wt - 53.01kg

~~Abdomen~~  
Doubts  
"marked"  
"W.W."

dry, non-irritating  
marked

Wound

① Rat 20 cm 180g

180  
g

Sur. 3  
super  
gff. Cancer of a vaginal  
tumor by  
x 3g

✓

# आंकिता विजयवर्गीय

बी. बी. एस., डी. एम. आर डी

प्रारं आई. फैलोशिप :

मी. हॉस्पिटल, मुंबई

मी. हॉस्पिटल, मुंबई

डिवोलाजिस्ट :

मी. हॉस्पिटल, नोएडा

मी. हॉस्पिटल, दिल्ली

मी. हॉस्पिटल लिमिटेड, कानपुर

राजाल नेहरू कैंसर हॉस्पिटल, भोपाल

PATIENT'S NAME : MRS. ANKITA

# DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

MRI FELLOWSHIPS :

- NANAVATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI

FMF Certified from

Fetal Medicine Foundation

Reg. No. MP-8932

FORMER RADIOLOGIST AT:

- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

AGE/SEX : 26Y/F

REF. BY : DR. POOJA SHRIVASTAVA ( MBBS, MS )

DATE : 06.11.2024

## OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 08.08.2024

GA(LMP): 12wk 6d

EDD : 15.05.2025

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 161 beats /min.
- PLACENTA: is grade I, posterior & not low lying.
- LIQUOR: is adequate for the period of gestation.

### Fetal morphology for gestation appears normal.

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- Both orbits & lens seen. PMT is intact. No intrathoracic mass seen. No TR.
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 2.0 mm ( WNL ).
- Ductus venosus shows normal flow & spectrum with positive "a" wave ( PI ~ 0.58 )

### FETAL GROWTH PARAMETERS

CRL 62.0 mm ~ 12 wks 4 days of gestation.

Estimated gestational age is 12 weeks 4 days (+/- 1 week). EDD by USG : 17.05.2025

Internal os closed. Cervical length is WNL ( 33.1 mm ).

➤ Baseline screening of both uterine arteries was done with mean PI ~ 1.12 ( WNL for gestation ).

### DIAGNOSIS:

- Single, live, intrauterine fetus of 12 weeks 4 days +/- 1 week.
- Gross fetal morphology is within normal limits.

Follow up at 19-22 weeks for target scan for detailed fetal anomaly screening.

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination.)

( DR. ANKITA VIJAYVARGIYA )

# First Trimester Screening Report

Patel Ankita

Date of birth : 08 February 1998, Examination date: 06 November 2024

Address: hno. 97, rajharsh colony kolar  
road  
Bhopal  
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

## Maternal / Pregnancy Characteristics:

Previous chromosomally abnormal child or fetus: Four first trimester miscarriage .

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0.

Maternal weight: 53.9 kg; Height: 157.5 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 08 August 2024

EDD by dates: 15 May 2025

## First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 12 weeks + 6 days from dates

EDD by scan: 15 May 2025

| Findings                 | Alive fetus    |        |
|--------------------------|----------------|--------|
| Fetal heart activity     | visualised     |        |
| Fetal heart rate         | 161 bpm        | ●————— |
| Crown-rump length (CRL)  | 62.0 mm        | ●————— |
| Nuchal translucency (NT) | 2.0 mm         |        |
| Ductus Venosus PI        | 0.580          | ●————— |
| Placenta                 | posterior high |        |
| Amniotic fluid           | normal         |        |
| Cord                     | 3 vessels      |        |

## Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

## Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR.; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible; both orbits & lens seen . PMT is intact.

Uterine artery PI: 1.12 equivalent to 0.680 MoM

Mean Arterial Pressure: 90.5 mmHg equivalent to 1.100 MoM

Endocervical length: 33.1 mm

## Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

| Condition  | Background risk | Adjusted risk |
|------------|-----------------|---------------|
| Trisomy 21 | 1: 878          | 1: 17564      |
| Trisomy 18 | 1: 2126         | 1: 13728      |