

TAL SCREENING REQUEST FORM

Triple and Quad Marker (14.0-22.6 wks)

Sample collection date :

8/1991

184

Date of Ultrasound : / /

CRL (in mm) : BPD :

trimester 9

Asian ☐ Others ☒

Own Eggs ☐

Donor Eggs ☒

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TEST REQUISITION FORM (TRF)



SPL CODE : SPLCG1020 MSP Pathlab

S.No.	Patient Name in Capital	Age/Sex	Test Code & Test Name	Sample Type	Barcode No.	Date : Sample Collection Date & Time	Ref. Customer	Referral Doctor
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1. Paola Deivedi 32 Dual Marker serum A0666718 B. DUREY M.D

2. Height - 5.5

3. Weight - 76

4. LMP - 16/08/84

5. DOB - 27/08/1991

6. MNO - 9078724847

Note Attached Clinical Report If Required

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NAME : MRS. POOJA DWIVEDI
REF. BY: DR. (MRS.) BAKHSHISH DUBEY

Age/Sex: 32Y/ F
DATE: 16/10/2024

ULTRASOUND OBSTETRIC

Single live intrauterine embryo, CRL 19.41 mm corresponding with 8 weeks + 4 days
+/- 3 days period of gestation.

Fetal cardiac activity is 165 / bpm, regular.

LMP:- 16/08/2024

G.Age by LMP
8 weeks 5 days

EDD by LMP
23/05/2025

G.Age by USG
8 weeks 4 days

EDD by USG
24/05/2025

Correct EDD : 23/05/2025

Yolk sac is normal.

No obvious adnexal mass lesion.

Internal os is closed.

Cervix - within normal limit

CRL 19.41

Impression:

- Single live intra uterine pregnancy MGA of 8 weeks 4 days.

Advice: - i) Double marker test.

ii) Follow up USG at 11 weeks to 13.6 weeks for NT scan.

Disclaimer

All congenital anomalies may not be detected on USG.

I Dr. Smita Tiwari, declare that I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Thanks for reference.

DR SMITA TIWARI
MD RADIODIAGNOSIS

14

PRE-NATAL SEX
DETERMINATION
IS NOT DONE HERE

ULTRASOUND DIAGNOSIS IS BASED ON APPEARANCE OF GRAY SCALE SHADES. AND IT IS ALSO AFFECTED BY TECHNICAL PITFALLS. HENCE IT IS SUGGESTED TO CORRELATE ULTRASOUND OBSERVATION WITH CLINICAL AND OTHER INVESTIGATION FINDING TO REACH THE FINAL DIAGNOSIS. NO LEGAL LIABILITY IS ACCEPTED. NOT FOR MEDICO-LEGAL PURPOSE.