

डॉ. अंकिता विजयवर्गीय

एम बी बी एस, डी एम आर डी

रज्य आर आर सीआरडिआर

मानवकरी इन्सिस्टन्स, एमई

हिंदुजा इन्सिस्टन्स, एमई

पूर्व सिकोलॉजिस्ट

फोर्टिस इन्सिस्टन्स, कोयंबूर

डी टी डी इन्सिस्टन्स, दिल्ली

किंगडोम इन्सिस्टन्स लिमिटेड, कोयंबूर

जवाहर लाल नेहरू जीवित इन्सिस्टन्स, कोयंबूर

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

MR FELLOWSHIP

• NARAYAN HOSPITAL, BOMBAY

• HINDUJA HOSPITAL, BOMBAY

FORMER RADIOLOGIST AT

• FORTIS HOSPITAL, NOIDA

• G.T.B. HOSPITAL, DELHI

• REGENCY HOSPITAL LTD, RAIPUR

• ARUNACHAL LAL WENRU CLINICAL HOSPITAL, BHOPAL

FMT Certified from

Fetal Medicine Foundation

Reg. No. MF-4532

MRS. PRIYANKA

Head:

- Head appears normal in size and shape.
- Cerebral structure appears normal.
- Both Lateral ventricles appear normal except both choroid plexuses cysts (largest ~4.7 mm ID at atrium (LVA) measured 5.46 mm. Cavum Septum Pellucidum is seen.
- Cerebellum appears normal. Transverse cerebellar diameter (TCD) measures 22.6 mm.
- Cisterna Magana is Normal in size [4.81 mm] and shape.
- No SDL is seen.

Spine:

- Full length of the vertebral column is visualized in Sagittal, Coronal and transverse planes. Normal alignment of vertebrae was recorded. No obvious defect was visualized.

Neck:

- No cystic lesion is visible around the fetal neck.
- Nuchal skin fold thickness (NF) measured 3.55 mm.

Face:

- Fetal face was visualized in profile and coronal scans.
- Both eyeballs, nose and lips appear normal.
- Nasal bone was well visualized.
- Pre-maxillary triangle appears intact.

Thorax:

- Normal cardiac situs and position.
- Four chambers view and outflow tracts view appear normal. All cardiac anomalies are out of preview of this study, dedicated Echo is not done & may be suggested for the same.
- Both lungs were visualized.
- No evidence of pleural or pericardial effusion.
- NO SDL seen in thorax.

P.T.O.

Shop No. 22/23, Lower Ground Floor (Basement) C.I. Square Mall, Kofar Road, Bhopal
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एम. बी. बी. एस., डी. एच. आर. डी.
एम. आर. आई. ऑनकोलाजी
नामवादी इतिहास, पृथ्वी
विदुषा इतिहास, पृथ्वी
पूर्व रीजिस्ट्रारशिप
कार्डिओ इतिहास, पृथ्वी
डी. डी. डी. इतिहास, विन्नी
विज्ञानी इतिहास विदुषा, कानपुर
जवाहर नाल पंथम बीरम इतिहास, पृथ्वी

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- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

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Reg. No. MF-8522

MRS. PRIYANKA

Abdomen :

- Anterior abdominal wall appears intact. Umbilical cord insertion was visualized.
- Normal abdominal situs.
- Fetal liver, gall bladder, stomach and bowel loops appear normal.
- No ascites.

Urinary Tract :

- Both kidneys appear normal in size. No pelvicalyceal dilatation.
- Urinary bladder appears normal.

Limbs :

- All the four limbs are seen. The long bones appear normal for the period of gestation.
- Both the hands and feet appeared normal.

Umb. Cord :

- Cord appears normal and reveals two arteries and one vein.

[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 composition). Therefore all fetal anatomical study has to be performed in every examination. Patient has been counseled about the capabilities & limitations of this examination.]

[I Dr. Ankita Vijayvargiya, declare that while conducting Sonography I have neither detected nor disclosed the sex of the fetus to anybody in any manner.]

(DR. ANKITA VIJAYVARGIYA)

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एम.डी.आर.आई. फेलोशिप

सामाजिक दायित्व, भुवनेश्वर

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DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

MBF FELLOWSHIP

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MINOLTA HOSPITAL, BHOJAN

FORUM NARAYAN, BHOPAL

FORUM HOSPITAL, BHOPAL

G.T.N. HOSPITAL, DELHI

RESEARCH HOSPITAL LTD, KANPUR

DR. BHAWAN LAL NENBU CANCER HOSPITAL, BHOPAL

MBF Certified from

Fetal Medicine Foundation

Reg. No. MP-2532

PATIENT'S NAME: MRS. PRIYANKA

REF. BY: DR. PUJA SINGH (MBBS, DGO)

AGE/SEX: 35Y/F

DATE: 25.11.2024

OBSTETRIC SONOGRAPHY WITH TARGETED FETAL SCAN

Settings - 3

Total examination time - 35 Min.

LMP: 25.06.2024

GA (LMP): 21 wk 6 d

EDD: 01.04.2025

Single live fetus seen in the intrauterine cavity in variable presentation.

Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 142 beats/min.

FETAL GROWTH PARAMETERS:

BDP	51.8	mm	~	21	wks	5 days of gestation.
HC	185.0	mm	~	20	wks	6 days of gestation.
AC	174.4	mm	~	21	wks	3 days of gestation.
FL	37.8	mm	~	22	wks	1 days of gestation.
HL	34.4	mm	~	21	wks	5 days of gestation.
TCD	22.6	mm	~	21	wks	0 days of gestation.
BPD	35.4	mm	~	22	wks	4 days of gestation.
NF	3.55	mm	~	-	-	-
LV (atria)	5.46	mm	~	-	-	-

Quantity of liquor is adequate. Placenta is placed high posterior (grade 1). Cervical length is normal 3.0 cms. Internal OS is closed at present. EDD by USG - 02.04.2025 EFW - 474gm +/- 69 gm.

➤ Baseline screening of both uterine arteries was done & reveals mean PI of ~ 0.98 (WNL for gestation).

IMPRESSION:

- Single, live, intrauterine fetus.
- Fetal size corresponds to 21 weeks 5 days +/- 1 week 2 days.
- Bilateral choroid plexus cysts - one of minor marker for chromosomal anomaly. Rest of fetal gross morphology examination within normal limits.

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एम. बी. बी. एस., पी. एच. डी.
एम. आर. ऑल. पैरामेडिकल;
नागावती हॉस्पिटल, मुंबई
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पूर्व रेडियोलॉजिस्ट
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डी. टी. सी. हॉस्पिटल, दिल्ली
के.डी.सी. हॉस्पिटल लिमिटेड, बंगलूर
कमलकांत मेमोरियल हॉस्पिटल, भोपाल

DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

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• D.T.S. HOSPITAL, DELHI
• REGENCY HOSPITAL LTD, KANPUR
• JAYAWANT LAL NENBU CANCER HOSPITAL, BHOPAL

DMR Certified from
Fetal Medicine Foundation
Reg. No. MF-0882

MRS. PRIYANKA

Head:

- Head appears normal in size and shape.
- Cerebral structure appears normal.
- Both lateral ventricles appear normal except both choroid plexuses cysts largest ~4.7 mm TD at atrium (LVA) measured 5.46 mm. Cavum Septum Pellucidum is seen.
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- No SOL is seen.

Spine:

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Neck:

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Name: **PROYAKKA, SSYB** Patient ID: **VSR000364-24-11-26-4**

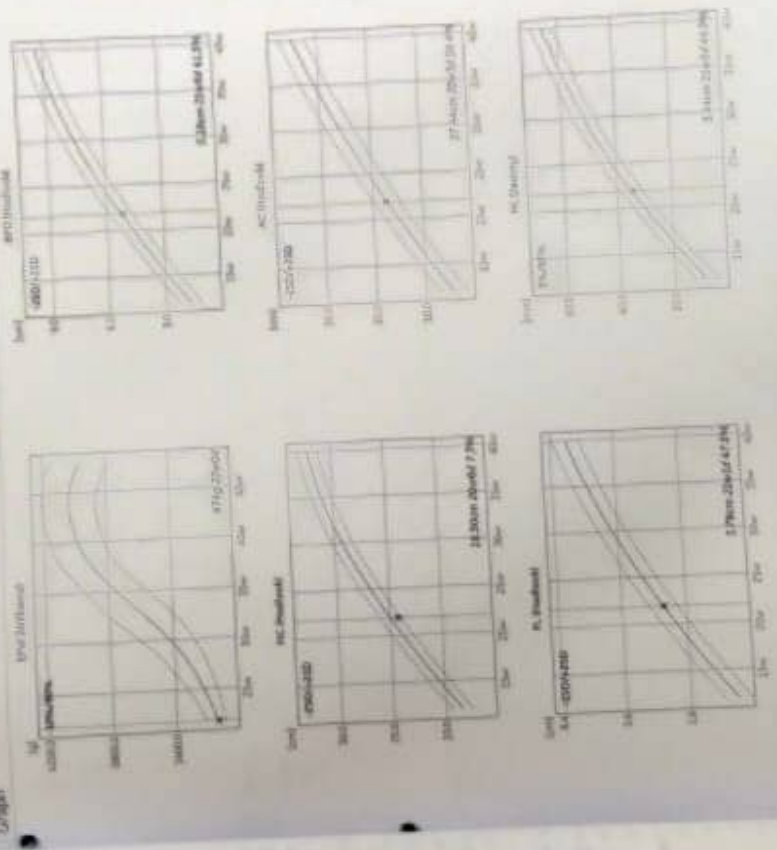
Outpatient Measurements

	Value	ref	ref	ref	ref	ref	ref	ref
Right Uterine								
ED	31.75 cmh	31.75						
Volume	45.35 cmh	45.35						
MD	30.40 cmh	30.40						
PI	0.56	0.56						
PI	0.37	0.37						
S/D	2.25	2.25						
HR	100 bpm	100						
Fetal Heart Rate								
Heartbeat/F/ft	142 bpm	142						

max
max
max
avg
avg
avg
max
avg

Graph

EGA Reference (M) (MP)



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एम. बी. बी. एस., डी. एम. डी.
एम. जार. आई. पी.एस.
गोवायरी हॉस्पिटल, पुणे
मोडला हॉस्पिटल, पुणे
एच. सेक्टर/अहमदनगर
महिला हॉस्पिटल, पोराज
डॉ. बी. डी. हॉस्पिटल, विरार
महिला हॉस्पिटल लिमिटेड, बंगलुरु
बंगलुरु नगर मेडिकल डीपार्टमेंट, बंगलुरु

DR. ANKITA VIJAYVARGIYA MBBS, DMRD

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REF. BY : DR. PUJA SINGH (MBBS, DGO)

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OBSTETRIC SONOGRAPHY WITH TARGETED FETAL SCAN

Findings - 1

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Internal OS is closed at present. EDD by USG - 02.04.2025. EFW - 474gm +/- 49 gm.

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- + Fetal size corresponds to 21 weeks 5 days +/- 1 week 2 days.
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[illegible][illegible]

MRS. PIOTRANIK

Abstract:

- Anterior abdominal wall appears intact. Umbilical cord insertion was visualized.
- Normal abdominal situs.
- Fetal liver, gall bladder, stomach and bowel loops appear normal.
- No ascites.

Ultimate Trust:

- Both kidneys appear normal in size. No pelvicalyceal dilatation.
- Urinary bladder appears normal.

Lipids:

- All the four limbs are seen. The long bones appear normal for the period of gestation.
- Both the hands and feet appeared normal.

Umb. Cord.:

- Cord appears normal and reveals two arteries and one vein.

(It must be noted that operational diversity may not always be suitable due to technical infrastructure issues, for example, that different, national industrial and fisheries, it might suggest. As Tashman et al. (2004) provides support for national fishing resources, it has been concluded about the capabilities & knowledge of the ecosystem.)

[1] Dr. Anilika Vijayarajya, declare that while conducting Sonography I have neither detected nor disclosed the sex of the fetus to anybody in any manner.]

(DR. ANHITA VILAVARGIYA)

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