

Dr. Sonal Phadtare

Fetal Medicine Consultant

PCPNDT Reg. No. PH/CSP/SDH-Baramati/746/2021

MBBS., MS (OBGY).

Fellowship in Fetal Medicine

Reg. No.: 2013/05/1597

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BARAMATI
FETAL MEDICINE
CENTRE



Anomaly Scan

Fauziya Bagwan

Date of birth: 04 March 2002
Referring doctor: Dr. Vaishali Gore

Examination date: 16 December 2024
Patient id: 1425

Maternal Blood Group: AB, Rhesus: positive; Maternal weight: 61.0 kg, Height: 157.5 cm, BMI: 24.6.

EDD: 26 May 2025 - Cycle: regular - LMP sure

Conception: spontaneous

LMP	Gestational age	EDD
US	17 weeks + 0 day(s)	26 May 2025
	17 weeks + 0 day(s)	26 May 2025

Obstetric History: Gravida: 1. Para: 0.

Family history: Consanguinity: no;

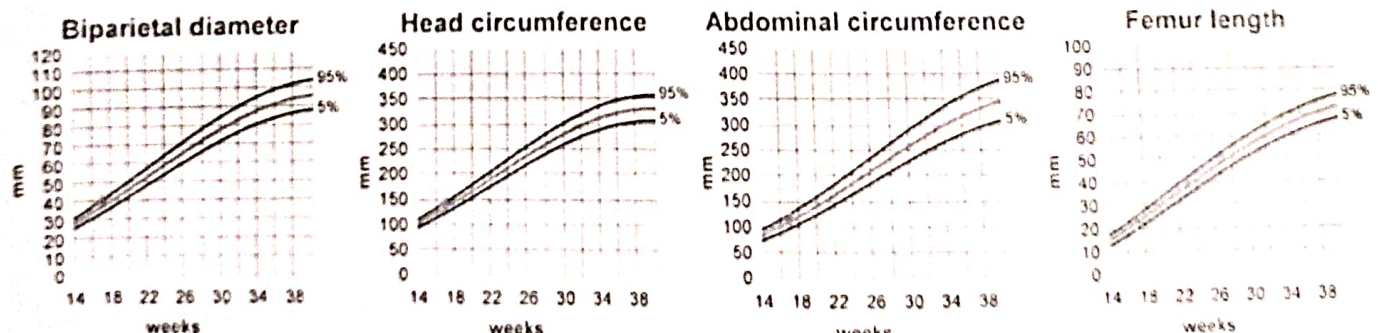
Indication

Routine, Anomaly scan

USS FINDINGS: Number of fetuses: 1
transabdominal scan, View: good.

Fetal heart activity	visualised	FHR	146 bpm	Fetal movements	normal
Presentation	breach	Placenta	lateral right	Placenta grade	Grannum 0
Amniotic fluid	normal	EFW	186 g	Cord	3 vessels

Examination Date	BPD	HC	FL	AC	CRL	Gestation
16 December 2024	41.0	142.6	22.7	117.5		17 w + 0 d



Transcerebellar Diameter (TCD):	17.2 mm	Cisterna Magna (CM):	4.0 mm	Ventricular Atrium:	6.2 mm
Nuchal Fold:	2.6 mm	Prenasal Thickness:	2.8 mm	Nasal Bone:	4.5 mm
Renal Pelvis Right:	2.0 mm	Renal Pelvis Left:	2.0 mm	Humerus:	22.4 mm

FETAL ANATOMY

HEAD:	Normal	BRAIN:	Normal	NECK:	Normal
SPINE:	Normal	FACE:	Normal	THORAX:	Normal

HEART: Normal ABDOMINAL WALL: Normal GIT: Normal
URINARY TRACT: Normal EXTREMITIES: Normal

UTERINE ARTERY DOPPLER: Mean PI 1.305, no notch

CERVICAL ASSESSMENT

Cervix length 35.4 mm

Funnelling no

Cervical Comment: normal cervical length

Doppler ultrasound

Uterine artery

PI left 1.350

PI right 1.260

Mean PI 1.305

RI left 0.69

RI right 0.68

Notch no notch



Cervical assessment

Cervix length 35.4 mm

Funnelling no

Comment normal cervical length

Conclusions

Diagnosis No obvious fetal defects

normal uterine artery Doppler and cervical length

Conclusion routine scan adequate assessment

Recommendations In view of early anomaly scan, rescan after 4 weeks to reassess the fetal anatomy in detail (15th to 25th January)

Comments

The EDD i.e 26/05/2025 assigned in the early pregnancy scan has been considered during scan today and today's biometry agrees with the dates.

Fetal growth and amniotic fluid are normal. There are no obvious structural defects or significant markers for chromosomal abnormalities. Fetal cardia shows a normally connected heart with no obvious defects and normal flow patterns.

The placenta is on the right lateral wall of the uterus, the lower edge of the placenta is well away from the internal os.

The cervix measures 35 mm with no evidence of funneling. The uterine artery Doppler is normal for this gestation.

As the mother has not had any first trimester optimal risk assessment, the mother the option of second trimester risk assessment with serum biochemistry i.e Quadruple test.

Please note for all your future visits to ANY SCAN CENTRE, it is mandatory by the GOI to produce prior to the scan

1. Photocopy(xerox) of Government approved photo ID card of the prospective mother (Aadhaar card, passport, voter ID, driving license etc)

2. Referral letter from your Doctor with indication for the scan and her/ his SEAL and SIGNATURE

Also, please keep extra time to fill the detailed GOI-mandated "F Form" before the scan which needs to be submitted online prior to the scan.

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Please note:

1. All anomalies cannot be ruled out on ultrasound due to technical limitations, maternal factors like amount of liquor, maternal habitus, previous scar, advanced gestational age etc. and fetal conditions like multiple pregnancies, fetal positions, late appearance of few anomalies etc
2. Absence of anomaly on ultrasound scan does not absolutely rule out the possibility of having one
3. For detail evaluation of fetal heart, advanced fetal echocardiography is required.

I, Dr. Sonal Phadtare (M.S OBGY; Fetal Medicine Consultant) declare that while conducting ultrasonography/ image scanning on Mrs. Fauziya Bagwan, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

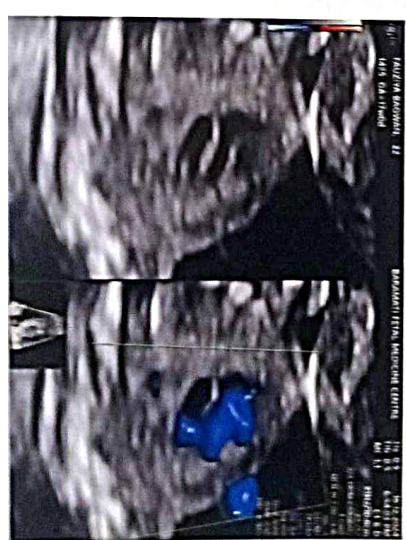
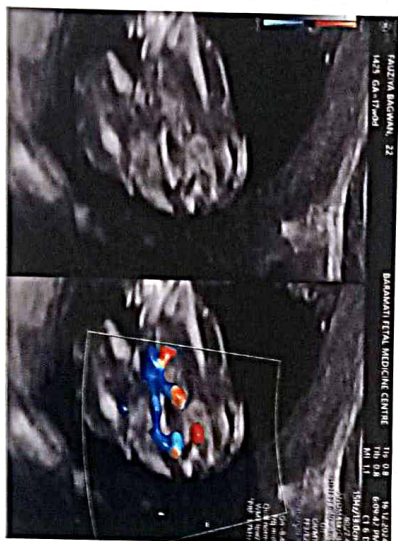
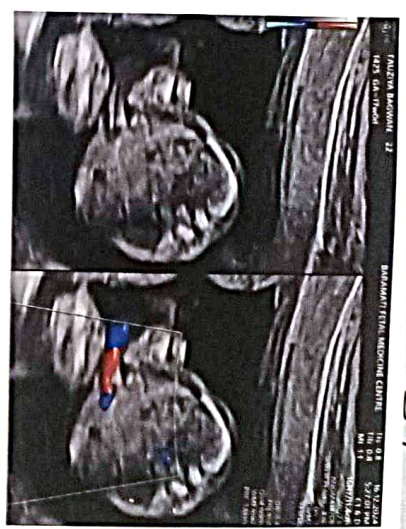
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MMC 2013/05/1597

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