

59 Mrs Ankita Tondan

32 Double

F mother

DOB - 22/11/1991

(1477245221)

wt - 64 kg

Hght - 5'3 inch

Patient Name: MRS ANKITA TANDON	Date: 14/12/2024
Patient Id: 32433	Age/Sex: 33 Years / FEMALE
Ref Phy: DR. PUJA SINGH MS	Contact No:

### Examination : Obstetric USG of First Trimester Scan Report (Level -1)

Dating	LMP	GA		EDD
		Weeks	Days	
By LMP	LMP: 08/09/2024	13	6	15/06/2025
By USG		14	0	14/06/2025
AGREED DATING IS (BASED ON Biometry)				

### Single live intrauterine gestation

### OBSTETRIC USG STUDY

Fetus : Single  
 Fetal Movement : Adequate  
 FCA : 149/ bpm ✓  
 Liquor : Normal  
 Placenta : RT Postero lateral

### Biometry (Headlock)

CRL	79.2 mm	14weeks 0 days
CERVIX	40.1 mm in length with closed os & canal.	

### Aneuploidy markers :

Nuchal Translucency	1.0 mm	Normal
Both Nasal Bones	2.5 mm	Normal
Umbilical cord	3 vessels	
Tricuspid flow	NO TR	
Ductus venosus	Normal continues forward flows. ✓	

### Fetal anatomy :

Head :	shape & size normal , Neck: normal , Spine: normal, Choroid plexus , Cerebral peduncles ,intracraniallucency , AD normal. ✓
Face:	Orbits, lenses, PMT, mandible gap sign normal. ✓
Thorax:	Lung parenchyma , CT ratio , diaphragm normal. ✓
Abdomen :	Normal ant. Abdominal wall & cord insertion , stomach , bowel loops, Kidneys , UB are normal. ✓
Extremities:	Both upper & lower limbs are normal. Hands , feet seen. ✓
Fetal spine :	Normal. ✓





Dr. Supriya Maheshwari  
Diagnosis | Reg. No. 11111

Dr. Supriya Maheshwari  
Ultrasound & Mammography Center

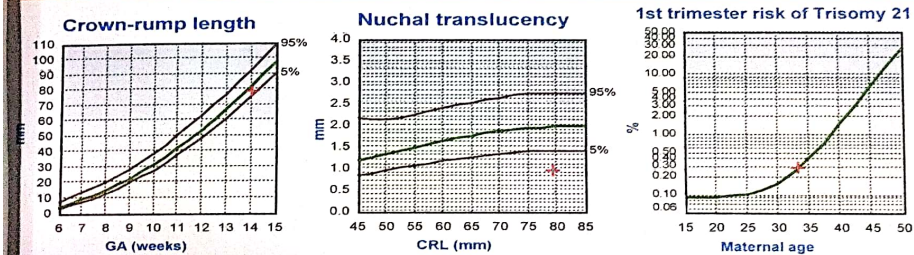
For Appointments Call Between  
10:30 AM - 07:30 PM

0755 42765  
0755 24765  
+91 98260572

Vessels	S/D	RI	PI	PI Percentile	Remarks
Right Uterine Artery	2.5	0.6	1	5.3%	No early Diastolic notch seen
Left Uterine Artery		1	3.74	99.98%	No early Diastolic notch seen
Mean Uterine Artery			2.37	97.4%	
Ductus venosus	2.9	0.65	1.19		PSV=28.9 Normal waveform Pattern

#### Impression :-

- Intrauterine gestation noted in RT horn of didelphys bicollis Uterus
- Single live Intrauterine gestation corresponding to 14 Wks 0 days Gestational age assigned as per biometry (CRL)



Not all anomalies can be detected all the times due to various technical and circumstantial reasons like gestation period, fetal position, quantity of liquor etc. T  
The present study can not completely confirm presence or absence of any or all the congenital anomalies in the fetus which may be detected on post natal period. Growth paramet  
The present study is based on International Data and may vary from Indian standards. Date of delivery (at 40 weeks) is calculated as per the present sonographic growth of fe  
The present study correspond with period of gestation by L.M.P. or by actual date of delivery. As with any other diagnostic modality, the present study should be correlated with clini  
The present study proper management. Except in cases of Fetal Demise or Missed Abortion, sonography at 20-22 weeks should always be advised for better fetal evaluation and also  
The present study for future reference.

Signature of Doctor/Person conducting ultrasonography/image scanning

DR SONAM VERMA declare that while conducting sonography on MRS ANKITA TANDON, I have neither detected nor disclosed the sex  
of the fetus to anybody in any manner.

DR SUPRIYA MAHESHWARI  
MD, RADIOLOGY  
CONSULTANT RADIOLOGIST  
Reg No : 11111

DR SONAM VERMA  
FETAL MEDICINE SPECIALIST MD,  
RADIOLOGY  
CONSULTANT RADIOLOGIST  
Reg No : 18797

