



Name	Mrs. KAJAL VERMA	Lab No. :	012501080051
Age/Gender :	23 YRS/FEMALE	Barcode No :	10531538
Ref.By :	Dr. Rinku Chongdar MS	Sample Received :	
RegisterDate :	08/Jan/2025 11:33AM	Result Reported :	09/Jan/2025 11:09AM
Client/Panel :	Standard		

Ultrasound

USG FWB NT NB

LMP: 10-10-2024.

UTERUS: Single intrauterine live fetus with changing lie is seen.

CRL: 70.5 mm (13 wks 2 days)

MA: 13 wks 0 day, UA: 13 wks 2 days.

Cardiac activity present. FHR: 165 bpm.

Placenta: Anterior. Grade - 0.

Liquor: Adequate.

Fetal head and spine are normal for age. Stomach, kidneys, UB, anterior abdominal wall and cord insertion normal.

4 chamber view seen.

All four limbs seen.

3 vessels cord seen.

NT: 1.6 mm.

NB: Present.

Normal waveform pattern DV.

Myometrial echopattern normal. No lesion.

Cx. (L): Adequate.

IO closed.

ADNEXA & OVARIES: Both adnexa are normal.

Fetal Doppler Study

	PI	RI	S/D
Rt. Uterine Artery	1.41	0.68	3.10
Lt. Uterine Artery	1.38	0.72	3.60

Dr. Suresh Khanduja
MD (Radiology)

Dr. Pankaj Kamra
MD (Radiology)

Dr. Rajni Kant
MD (Radiology)

Dr. Mayurika Singh
DNB (Radiology)

UNITED DIAGNOSTICS

22, Thornhill Road, Civil Lines, Prayagraj (U.P.) - 211001

Dr. Syed Sultan Anjum Dr. Shashi Kant

DMRD (Radiology) & RESEARCH MD (Radiology)

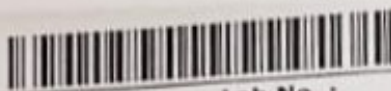
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✉ udr@united.ac.in

🌐 www.udr.net.in



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Ultrasound

Uterine artery Doppler screening is negative for PET. Mean PI value - 1.3

IMPRESSION: Single live intrauterine pregnancy of 13 weeks 2 days ($\pm$ 1 week) with EDD - 15-07-2025.

Adv: Clinical correlation and Level II at 18-22 weeks.

Declaration:

I, Dr. S. Khanduja (name of person conducting USG) declare that while during the ultrasound of Mrs. Kajal Verma (name of pregnant women) I have neither detected nor disclosed the sex of the foetus to anybody in any manner.

Note- Detailed fetal anatomy may not be always completely visible due to technical factors related to fetal position, amniotic fluid volume and fetal movements. Sonography may also not detect minor malformation and cannot determine the functional status of any organ.

End Report

Assay results should be interpreted only in the context of other laboratory findings and the total clinical status of the patient.

Dr. Suresh Khanduja MD (Radiology) Dr. Pankaj Kamra MD (Radiology) Dr. Rajni Kant MD (Radiology) Dr. Mayurika Singh DNB (Radiology)

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**UNITED DIAGNOSTICS
& RESEARCH**

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☎ 0532-2261500 | 📞 7081777770 | ✉ udr@united.ac.in | 🌐 www.udr.net.in

- Clinical Correlation is essential for final diagnosis.
- If test results are unsatisfactory, please contact personally.
- This report is for perusal of doctors only.
- No compensation Liability
- All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound.
- Printing Error, if any, should be brought to notice within 7 days.
- Not for medicolegal cases.



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