



Name : MRS. MANISHA
Age/Sex : 19 Years / Female
Ref : C/O NEO CARE HOSPITAL

Regn.No :

25-3746

Regn. Date & Time : 15 Feb 2025 2:47 PM

Report. Date & Time : 15 Feb 2025 03:30 PM

IRIS - 4D FETAL MEDICINE UNIT

ADDRESS: Building No : 9-4-84/15, 15 Menon square, Nanal Nagar 'X' Road, Mehdiapatnam, HYD.
Phone No.: 8142201133 / 44 / 55
EMAIL: iris4ddiagnostic@gmail.com WEBSITE : www.Irisind.in
NABL Accredited labs
Genetics sampling and counseling
LICENCE Health spark software Women's health module (Radiology)

SINGLE LIVE INTRAUTERINE GESTATION :

BIOMETRY

Biparietal diameter = Calculation sheet attached.
Head circumference = Calculation sheet attached.
Abdominal circumference = Calculation sheet attached.
Femur length = Calculation sheet attached.

BIOMETRIC CALCULATIONS AND PREDICTIONS (+/- 15% or +/- 3 sd)

Gestational Age Projected by Fetal Size : 20 weeks & 3 days
Estimated Fetal Weight : 356 gms
Expected Date of Delivery Projected by Fetal Size : 02/07/2025

DYNAMIC OBSERVATIONS

Fetal Presentation : **VARIABLE**
Fetal Cardiac Activity : **Present**
Fetal Limb Movements : **Present**

PLACENTA

Site : **ANTERIOR WALL UPPER AND MIDDLE SEGMENT**

Evaluated on points : Thin, Thick, Small, enlarged, Hydropic, Jelly like areas, Venous lakes, Cysts, Molar placenta, Mass, Clot, Abruptio Retro placental clot size, Basal plate changes, Central cotyledon changes, Atypical calcification, Degenerated areas, Hyper maturity.

Grade of Maturity (Grannum grading) : **I**

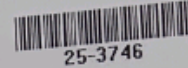
AMNIOTIC FLUID (AFI)

Amniotic Fluid : **ADEQUATE**

UTERINE CAVITY

Morphology / Myometrium : **No Obvious Abnormality**

Evaluated on points : Amniotic band / uterine septum / fibro muscular band.



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CERVIX

Technique : TAS
Cervix Length : 3.4 Cms
Internal OS Status : Closed

FETAL CARDIAC RHYTHM

Technique : Pulse wave doppler
Evaluated on points : Fetal respiratory variation / Atypical variation / Typical variations. Forward diastolic flow is present in umbilical artery throughout diastole.
FHR : 157 / min, Regular.

SUMMARY IMPRESSION & COMMENTS: SUGGESTIVE OF A SINGLE VIABLE 20 - 21 WEEKS PREGNANCY.

Performing physician:

Dr. KUSUMA S

MBBS., MD DNB RADIOLOGY

PNDT declaration : Form G, Form F Filled ; I HAVE NOT DISCLOSED THE GENDER OF FETUS TO ANYBODY IN ANY MANNER
Disclaimer : This check list is not a guarantee of absence of anomalies.

DR. P. MOHAN RANGANAYAKULU MD
DR. KUSUMA MD, DNB

DR. GAURAV SHUKLA DMRD
DR. SAHITHI MD

DR. A SWETHA REDDY MD
DR. AAMER MIRZA MBBS,MD

Sonography is a study of Sound Reflections & Shadows. It is not always 100% accurate. This report is an opinion about probability of a diagnosis. Report has to be validated by correlation with patient history and other investigations etc or Further evaluation. Findings need to be correlated clinically.
This Report is Electronically Checked & Authorised By

JUVERIA

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ULTRASOUND TIFFA-TARGETED IMAGING FOR FETAL ANOMALIES

HEAD

Intact cranium.
Cavum septum pellucidum.
Midline falx.
Thalami.
ventricles.
Cerebellum (TCD -).
Cisterna magna (CM -).

- Normal.
- Normal.
- Normal.
- Normal.
- Normal.
- Normal.
- Normal.

FACE

Both orbits present.
Median facial profile.
Mouth present.

- Normal.
- Normal.
- Normal.

NECK

Absence of masses (e.g. Cystic hygroma)

- Normal

CHEST/HEART

Appearance of shape/ size of chest & lungs.
Heart activity present.
Four-chamber view of heart position.
Aortic and pulmonary outflow tracts.
Evidence of diaphragmatic hernia.

- Normal
- Normal
- Normal
- Normal
- No

ABDOMEN

Stomach position.
Bowel not dilated.

- Normal.
- Normal.

Both kidneys present.

- Mildly prominent bilateral renal pelvis,
Right measures 4.5 mm and Left measures 5.5 mm in AP diameter.

Cord insertion site.

- Normal.

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SKELETAL

No spinal defects or masses(transverse and sagittal views) .
Arms and forearms present, normal relationships.
Thigh and Legs present, normal relationships.
Fist, feet and finger counting not included.

UMBILICAL CORD

Three vessel cord

- Normal.

SUMMARY IMPRESSION & COMMENTS:

FINDINGS ON EVALUATION OF ABOVE ORGAN SYSTEMS IS SUGGESTIVE OF MILDLY PROMINENT BILATERAL RENAL PELVIS, REST OF THE STUDY IS NORMAL

COMMENTS:

All fetal anomalies cannot be detected by ultrasound alone. The pickup rate of abnormalities depend on the gestational age of the fetus, Fetal position, Maternal habitus, Tissue penetration of ultrasound wave and machine resolution. Some anomalies need serial scans to be detected.

Fetal 2D echocardiography is required to detect fetal cardiac anomalies.

Bones of the carpus and tarsals with associated articulation and also internal anatomy of cardiac & connections not evaluated separately & individually in this study.

The results of today's scan has been discussed with the parents. They were aware that ultrasound examination alone cannot detect all genetic syndromes and chromosomal abnormalities, this report is only a professional opinion and not final diagnosis. This report is not for medicolegal purposes.

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Patient / Exam Information

Date of Exam: **15.02.2025**

Name: **MANISHA**

Perf. Phys:

Patient ID: **15920-25-02-15-46**

Ref. Phys:

DOB:

Age:

Sex:

Female

Sonographer:

Indication:

Exam Type:

LMP: **26.09.2024**

GA(LMP)

20w2d

EDD(LMP)

03.07.2025

Grav:

Ab:

DOC:

Para:

Ect.:

GA(AUA)

20w3d

EDD(AUA)

02.07.2025

EFW (Hadlock)	Value	Range	Age	Range	Williams
AC/BPD/FL	356g	± 52g	20w3d		N/A

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GA	Range	Dev.
BPD (Hadlock)	☒	4.78 cm	0.95	4.78		max	20w3d	18w5d-22w1d	57.0%
AC (Hadlock)	☒	15.12 cm	15.12			max	20w2d	18w2d-22w3d	46.0%
FL (Hadlock)	☒	3.38 cm	3.38			max	20w4d	18w6d-22w3d	53.5%

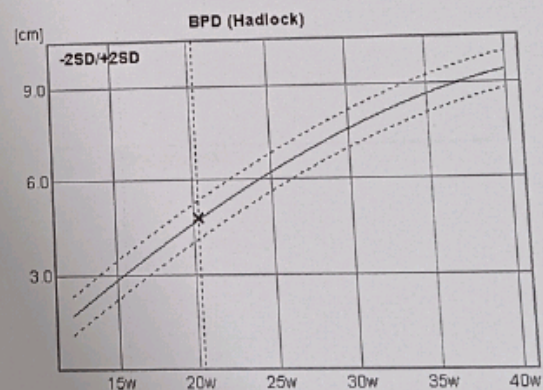
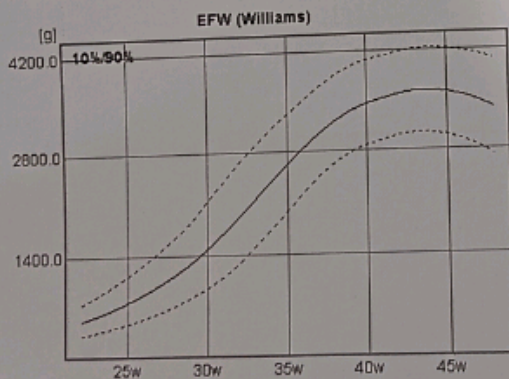
2D Calculations	Range
FL/AC	22% (20 - 24%)
FL/BPD	71% (GA: OOR)

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
A Fetal Heart Rate								avg.
FHR	157 bpm	157						

Graph

GA Reference: GA(LMP)

Fetus: A



OB Report

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IRIS DIAGNOSTICS

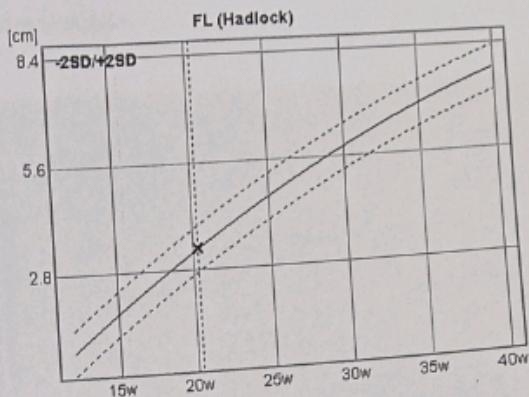
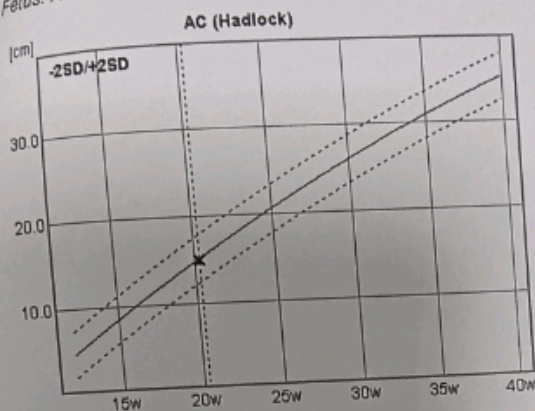
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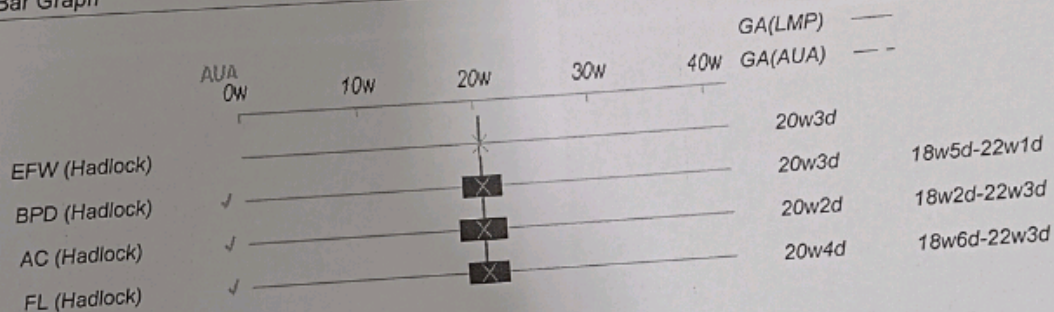
GA Reference: GA(LMP)

Graph

Fetus: A



Bar Graph



Date: 15.02.2025 Perf. Physician:

Sonographer:

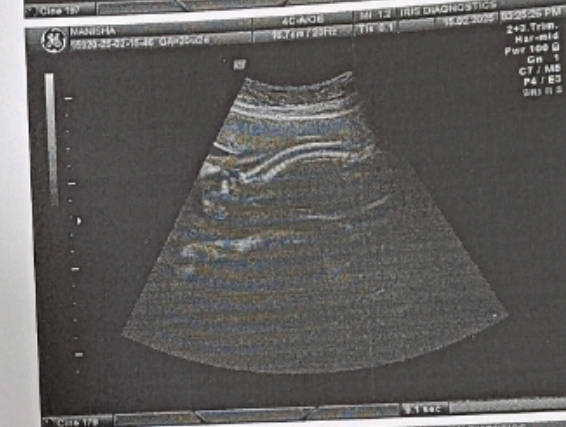
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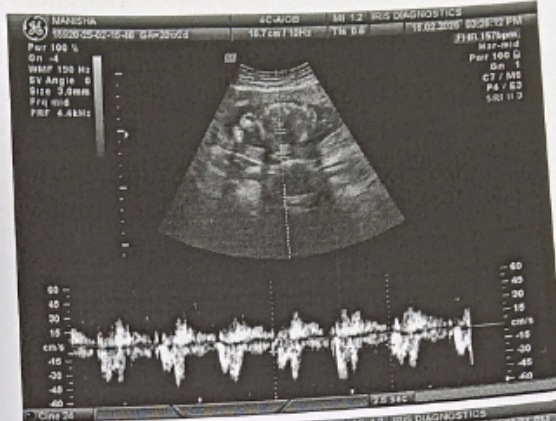
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