

Patient name	Mrs. SADIYA SADAF ZAHED KHAN PATHAN	Age/Sex	23 Years / Female
Patient ID	D24412	Visit No	1
Referred by	Dr. KARUNA MURKEY	Visit Date	16/04/2025
LMP Date	30/11/2024 LMP EDD: 06/09/2025[19W 4D]   C-EDD: 23/10/2025[12W 6D]		

## OB - First Trimester Scan Report

### Indication(s)

#### FIRST TRIMESTER NUCHAL TRANSLUCENCY AND ANOMALY SCAN

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

### Maternal

Cervix measured 3.10 cms in length.

Right uterine PI : 1.5.

Left uterine PI : 2.9.

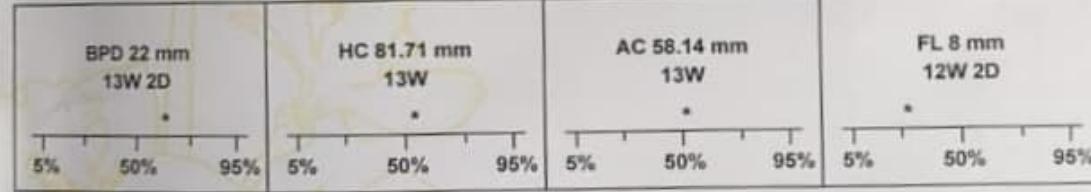
Mean PI : 2.20 (84%ile)

### Fetus

#### Survey

Placenta	: Posterior
Liquor	: Normal
Umbilical cord	: Two arteries and one vein
Fetal activity	: Fetal activity present
Cardiac activity	: Cardiac activity present Fetal heart rate - 148 bpm

#### Biometry(Mediscan, Hadlock)



CRL - 65 mm(12W 6D)

#### Aneuploidy Markers

Nasal Bone : seen

Nuchal translucency : 1.2 mm Normal.

Ductus venosus : normal flow.

Tricuspid regurgitation : No evidence of tricuspid regurgitation..

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**Fetal Anatomy**

Head: normal, Neck: normal, Spine: normal, Face: normal, Thorax: normal, Heart: normal, Abdomen: normal,  
Extremities: normal

Head :Both lateral ventricles seen. Intracranial translucency appeared normal.

Face :Orbits and Premaxillary triangle seen

Heart :Heart - Two inflows and outflows imaged in colour.

**Impression**

INTRAUTERINE GESTATION CORRESPONDING TO A GESTATIONAL AGE OF 12 WEEKS 6 DAYS

GESTATIONAL AGE ASSIGNED AS PER BIOMETRY ( CRL )

MENSTRUAL AGE 19 WEEKS 4 DAYS

CORRECTED EDD 23-10-2025

PLACENTA - POSTERIOR

LIQUOR - NORMAL

**MATERNAL - LEFT UTERINE ARTERY DOPPLER SHOWS HIGH RESISTANCE TO FLOW**

- (PI >95 %tile) S/O increased risk of fetal growth restriction and / or preterm pre eclampsia.

**SUGGESTED**

1. COMBINED FIRST TRIMESTER SCREENING FOR DOWNS SYNDROME.(Blood test cut off CRL 84mm)
2. KINDLY CONSIDER STARTING LOW DOSE ASPIRIN IN VIEW OF INCREASED UTERINE ARTERY PI.  
(150 mg as per new ASPRE trial)
3. DETAILED ANOMALY SCAN AT 20 WEEKS.

(Please bring referral letter.)

**Note - Nuchal translucency NT was measured as per FMF (Fetal Medicine Foundation U.K. ) Guidelines.**

I Mrs. Sadiya Sadaf .... Declare that while undergoing Ultrasonography, I do not want to know the sex of my fetus.  
DECLARATION - I declare that while conducting ultrasonography / image scanning, I have neither detected nor disclosed the sex of the fetus to anybody in any manner. All congenital anomalies and genetic conditions may not be detected on ultrasonography due to limitations like fetal position, amount of liquor, previous scars, Small VSDs, late appearance of few anomalies, TO fistula and structures that are not part of routine imaging protocol. Detailed fetal echo not included in this scan.

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