



Patient name	Mrs. BABITA YOGESH GAWAI	Age/Sex	34 Years / Female
Patient ID	E79276-25-04-18-4	Visit no	1
Referred by	Dr. KARUNA MURKEY, M.D. (OB GY)	Visit date	18/04/2025
LMP date	21/12/2024, LMP EDD: 27/09/2025[16W 6D]		

OB - 2/3 Trimester Scan Report

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

Maternal

Cervix measured 3.60 cm in length,
os closed.

Right Uterine	0.66	● — — — (2%)
Left Uterine	1.32	— — — ● (53%)
Mean PI	0.99	— — — ● — — — (19%)

Fetus

Survey

Presentation : Changing
Placenta : Anterior
Liquor : Normal
Umbilical cord : Three vessel cord seen.
Fetal activity : Fetal activity present
Cardiac activity : Cardiac activity present
Fetal heart rate - 148 bpm

Biometry(Hadlock,Mediscan)

BPD 31.1 mm 15W 5D (11%ile)	HC 112 mm 15W 3D (4%ile)	AC 97.9 mm 15W 6D (25%ile)	FL 18.9 mm 15W 4D (8%ile)	EFW BPD,HC,AC,FL 133 grams (4%ile)
5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50% 95%	5% 50% 95%

Long bones	Right (mm)	Left (mm)
Tibia	15.2, 14W 6D ● — — — (2%)	15.4, 14W 6D ● — — — (2%)
Fibula	14.4, 14W 5D ● — — — (1%)	14.8, 14W 6D ● — — — (2%)
Humerus	19, 15W 2D ● — — — (5%)	18.9, 15W 2D ● — — — (5%)
Radius	15.8, 15W 2D ● — — — (9%)	16.2, 15W 5D ● — — — (12%)
Ulna	15.6, 14W 4D ● — — — (2%)	16.1, 14W 6D ● — — — (2%)

TCD : 14.5 mm

Aneuploidy Markers

Nasal Bone : 4.46 mm - Present
Nuchal Fold : 2.27 mm - Normal

/Sex
no
date

34 Year
1
18/04/2025



Balaji
DIAGNOSTICS

Dr. Ravindra R. Kalode

M.D. (Radiodiagnosis)
Ex. SR. SGPGIMS, Lucknow.

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tal Anatomy

- Head** : Cisterna magna measured 2.74 mm
Cranium is intact.
Midline falx seen.
Cavum septum pellucidum noted.
Both lateral ventricles appeared normal.
Both thalami normal/ Unfused.
Posterior fossa appeared normal.
Cerebellar hemispheres and vermis is normal.
Fourth ventricle is normal.
Cisterna magna is normal.
No identifiable intracranial lesion seen.
- Neck** : Neck appeared normal.
No evidence of any mass in neck.
Hypopharynx outer wall are concave.
No evidence of any dilated pouch in neck.
- Spine** : Entire spine visualised in longitudinal and transverse axis.
Vertebrae and spinal canal appeared normal
- Face** : IOD 8.2 mm
BOD 22.3 mm
Fetal face seen in the coronal and profile views.
Both orbits, nose and mouth appeared normal.
Median facial profile is normal.
Upper lip is intact.
- Thorax** : Both lungs seen. Size and shape of lungs is normal.
No evidence of pleural or pericardial effusion.
No evidence of SOL in the thorax.
No evidence of any diaphragmatic hernia
- Heart** : Heart appears in the mid position.
Normal cardiac situs and Axis. Four chamber view normal.
Outflow tracts appeared normal. Normal crossing of outflow tracts.
3VV and 3VT views are normal.
Venoatrial, atrioventricular and ventriculoarterial connections are normal.
- Abdomen** : Abdominal situs appeared normal.
Stomach and bowel appeared normal.
Normal bowel pattern appropriate for the gestation seen.
No evidence of ascites.
Abdominal wall intact.
Umbilical cord insertion site is normal.
- KUB** : Right and Left kidneys appeared normal.
No evidence of any Hydronephrosis.
Bladder appeared normal



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Al Anatomy

Remiti : All fetal long bones visualized and appear normal for the period of gestation.
Both feet appeared normal

Please Note:- This is a obstetrical ultrasound, mainly done for estimation age, amount of liquor, placental position and general well being of foetus and for evaluation of congenital anomalies. Moreover, the anomalies in relation to foetal heart and limbs are extremely difficult to detect due to constantly changing position of foetus and overlapping of it's various parts. The thickness of abdominal wall fat when increased adversely affects the visualisation of structures and reduces resolution. Not all congenital anomalies can be detected on antenatal ultrasound. Some are evolving anomalies and may not be seen on initial ultrasonography examination. Some anomalies can only be diagnosed in advanced stage of gestation and may not be seen in initial ultrasound examination. Findings such as increased NT or nuchal fold thickness, echogenic intracardiac focus, choroid plexus cyst are transient in nature and may disappear in later stage of gestation. Only less than 60 percent of cardiac anomalies are detected on detailed fetal echocardiography.

Impression

Single gestation corresponding to a gestational age of 16 Weeks 6 Days

Gestational age assigned as per LMP

Placenta - Anterior

Presentation - Changing

Liquor - Normal

Present Ultrasound size corresponds to 15 Weeks 3 days.

No obvious congenital anomaly.

Fetal weight 133 gms.

2nd trimester screening for Downs

Maternal age risk 1 in 440

Fetus	2nd Trimester Downs Risk Estimate	Markers - Present	Markers - Absent
A	1 in 1467		Increased nuchal fold, Short humerus, Short femur, Mild hydronephrosis, Intracardiac echogenic focus, Echogenic bowel, ARSA, Absent or hypoplastic NB, Ventriculomegaly

Disclaimer

Dr. Ravindra Kalode declare that while conducting ultrasonography/image scanning on this patient,
I have neither detected nor disclosed the sex of her fetus to anybody in any manner.

Dr. Ravindra R. Kalode MD (Radiodiagnosis) MMC Reg No: 70454
Foetal Medicine Foundation (UK) certified. FMF ID 204450

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