

80

ms shuman heer 20415

Deuble

marks

Height  $\rightarrow$  5.31m

wt  $\rightarrow$  54.4kg

DOR- 11/08/2006

Reg No. MP-4298



- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasonography, Wadia Hospital Mumbai.
- Ex. Consultant Gynaecologist and Sonologist Urban RCH programme J P Hospital, Bhopal.

**Obstetrician & Gynaecologist**

Trained in : Gynaecological Endoscopy Laparoscopy & Hysteroscopy. Obstetric & Gynaecological Ultrasonography Laparoscopic Sterilization & Family Planning

Consultation fee valid for 3 visits/15 days whichever is earlier in routine and hours only (Monday to Saturday)



Name : MRS. SHIVANI KEER

**Age/Sex :** 20 Years / Female

LH-A-011352

Address : Bhojpur

Mobile No.: 6268547017

**Date :** 12-May-2025

201 54.46

BP 117/63

Pulse 116/min

$\leq p_{0.2} \text{ 98\%}$

Ans  
Oxide  
(NH, NH<sub>2</sub>)

sup  $\frac{1}{2}$  Nanson on 12/7

Ben S. Zuckerman

22 Egt Kanten Hg Bg

2-2 days later and 1st day

Chris Yang - High by  
smile

22  
Jan  
Sander  
water  
hub

Reena Singh

I wonder



# LOTUS HOSPITAL & MATERNITY HOME

M-351, Rajharsh Colony, Nayapura, Kolar Main Road, Bhopal

## REPORT

Regn.:

Pt. Name:

R/By:

Age :

Sex :

Date :

LMP

### USG OBSTETRIC

A single live foetus seen in intrauterine cavity with presentation at the time of scan

Placenta

Fotal Parameters

BPD - mm

HC - mm

AC - mm

FL - mm

wks days +/- w d

wks days +/- w d

wks days +/- w d

wks days +/- w d

Mean Gestational Age Weeks

Liquor-Adequato

FHR- beats/min regular

Active foetal movement noted.

EDD-

EFW

Subsonic wave collection seen

IMPRESSION: REAL TIME OBSTETRIC USG STUDY REVEALS:

SINGLE LIVE INTRAUTERINE FOETUS IN PRESENTATION AT THE TIME OF SCAN  
CORRESPONDING TO A MEAN GESTATIONAL AGE 6 WEEKS 1 DAYS

(1) Detailed foetal anatomy may not always be visible due to technical difficulties related to foetal movements, foetal position and amniotic fluid volume. Hence all foetal anomalies may not necessarily be detected at every examination.

(2) DECLARATION-I POOJA SHRIVASTAVA DECLARE THAT WHILE CONDUCTING ULTRA SONOGRAPHY ON ..... HAVE NEITHER DETECTED NOR DISCLOSED THE SEX OF HER FETUS TO ANY BODY IN ANY MANNER.

Radiological investigations have their own and limitation. The above report is an opinion and not the final diagnosis.  
This to be co-related with clinical profile investigations. In case of any discrepancy a review may be asked

Dr. Pooja Shrivastava  
MBBS, MS (Obst. & Gynae)  
MP 4298

PATIENT'S NAME : MRS. SHIVANI KEER

AGE/SEX : 19 Y/F

REF. BY : DR. POOJA SHRIVASTAVA ( MBBS, MS )

DATE : 12/05/2025

**OBSTETRIC USG (EARLY ANOMALY SCAN) WITH PRE-ECLAMPSIA SCREENING**

LMP: 07/02/2025

GA (LMP) : 13wk 3d

EDD : 14/11/2025

- Single live fetus seen in the intrauterine cavity in **variable** presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 165 beats /min.
- PLACENTA: is **grade I, posterior & not low lying**.
- LIQUOR: is **adequate** for the period of gestation.

**Fetal morphology for gestation as described .**

- Cranial ossification appears normal. Midline falx is seen. Choroid plexuses are seen filling the lateral ventricles. No posterior fossa mass seen. Spine is seen as two lines. Overlying skin appears intact.
- No intrathoracic mass seen. No TR .
- Stomach bubble is seen. Bilateral renal shadows is seen. Anterior abdominal wall appears intact.
- Urinary bladder is seen, appears normal. 3 vessel cord is seen.
- All four limbs with movement are seen. Nasal bone well seen & appears normal. Nuchal translucency measures 2.2 mm ( WNL ).
- Ductus venosus shows normal spectrum with positive "a" wave ( PI ~ 1.22 ) .

**FETAL GROWTH PARAMETERS**

- |     |      |    |   |    |     |                      |
|-----|------|----|---|----|-----|----------------------|
| CRL | 83.4 | mm | ~ | 14 | wks | 2 days of gestation. |
|-----|------|----|---|----|-----|----------------------|
- Estimated gestational age is **14 weeks 2 days (+/- 1 week)**. EDD by USG : 08/11/2025
  - Internal os closed. Cervical length is WNL ( 30.8 mm ).
  - Baseline screening of both uterine arteries was done & reveals mean PI of ~ 1.88 ( WNL for gestation )

**PRESSION:**

- ↓ Single, live, intrauterine fetus of 14 weeks 2 days +/- 1 week.
- ↓ Gross fetal morphology is within normal limits.

**Suggest : Clinical correlation & follow up at 19-20 weeks for target scan for detailed fetal anomaly screening.**

Declaration : I have neither detected nor disclosed the sex of the fetus to pregnant woman or to anybody. (It must be noted that detailed fetal anatomy may not always be visible due to technical difficulties related to fetal position, amniotic fluid volume, fetal movements, maternal abdominal wall thickness & tissue ecogenicity. Therefore all fetal anomalies may not be detected at every examination. Patient has been counselled about the capabilities & limitations of this examination. )

( DR ANKITA VIJAYVARGIYA )



# First Trimester Screening Report

KEER SHIVANI

Date of birth : 11 August 2006, Examination date: 12 May 2025

Address: H.NO. 00 BHOJPUR RAISEN  
~~SHIVANI~~

Referring doctor: DR. POOJA SHRIVASTAVA ( MBBS, MS )

## Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).

Parity: 0, Spontaneous deliveries between 16-30 weeks: 0.

Maternal weight: 54.0 kg; Height: 160.0 cm.

Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: no; Antiphospholipid syndrome: don't know; Patient's mother had preeclampsia: don't know.

Method of conception: Spontaneous;

Last period: 07 February 2025

EDD by dates: 14 November 2025

## First Trimester Ultrasound:

US machine: phillips affinity 50. Visualisation: good.

Gestational age: 13 weeks + 3 days from dates

EDD by scan: 14 November 2025

Findings	Alive fetus	
Fetal heart activity	visualised	
Fetal heart rate	165 bpm	—●—
Crown-rump length (CRL)	83.4 mm	—●—
Nuchal translucency (NT)	2.2 mm	
Ductus Venosus PI	1.220	—●—
Placenta	posterior high	
Amniotic fluid	normal	
Cord	3 vessels	

## Chromosomal markers:

Nasal bone: present; Tricuspid Doppler: normal.

## Fetal anatomy:

Skull/brain: appears normal; Spine: appears normal; Heart: No TR; Abdominal wall: appears normal; Stomach: visible; Bladder / Kidneys: visible; Hands: both visible; Feet: both visible.

Uterine artery PI:	1.88	equivalent to 1.270 MoM
Mean Arterial Pressure:	82.2 mmHg	equivalent to 1.000 MoM

## Risks / Counselling: