

First Trimester Screening Report

Fetal growth restriction before 37 weeks

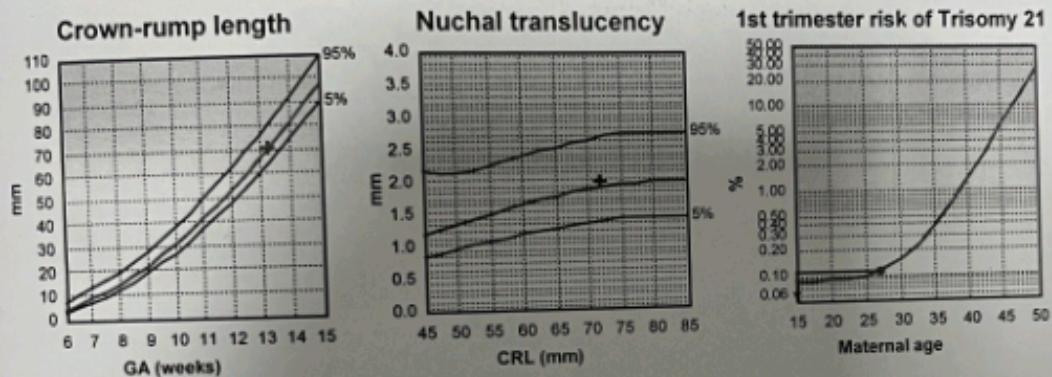
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The background risk for aneuploidies is based on maternal age (27 years). The adjusted risk is the risk at the time of screening, calculated on the basis of the background risk and ultrasound factors (fetal nuchal translucency thickness, nasal bone, tricuspid Doppler, ductus venosus Doppler, fetal heart rate).

Risks for preeclampsia and fetal growth restriction are based on maternal demographic characteristics, medical and obstetric history, uterine artery Doppler and mean arterial pressure (MAP).

All biophysical markers are corrected as necessary according to several maternal characteristics including racial origin, weight, height, smoking, method of conception and parity.

The estimated risk is calculated by the FMF-2012 software (version 2.81) and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037116). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).



DR. ANKITA VIJAYVARGIYA

MBBS, DMRD

श्री. बी. एस., डी. एम. आर डी
 आर आर्ट. फैलोशिप :
 वर्षी हॉस्पिटल, मुंबई
 जा हॉस्पिटल, मुंबई
 रेडियोलॉजिस्ट :
 ईस हॉस्पिटल, नोएडा
 डी. बी. हॉस्पिटल, दिल्ली
 सी. हॉस्पिटल लिमिटेड, कानपुर
 हर लाल नेहरू कैंसर हॉस्पिटल, भोपाल

MRI FELLOWSHIPS :

- NANAVATI HOSPITAL, MUMBAI
- HINDUJA HOSPITAL, MUMBAI
- FORMER RADIOLOGIST AT:
- FORTIS HOSPITAL, NOIDA
- G.T.B HOSPITAL, DELHI
- REGENCY HOSPITAL LTD, KANPUR
- JAWAHAR LAL NEHRU CANCER HOSPITAL, BHOPAL

FMF Certified from
 Fetal Medicine Foundation
 Reg. No. MP-8932

PATIENT'S NAME : MRS. MONIKA

AGE/SEX : 26Y/F

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

DATE : 17.05.2025

OBSTETRIC USG (EARLY ANOMALY SCAN)

LMP: 05.02.2025

GA(LMP):14wk 3d

EDD : 12.11.2025

- Single live fetus seen in the intrauterine cavity in variable presentation.
- Spontaneous fetal movements are seen. Fetal cardiac activity is regular and normal & is 167 beats /min.
- PLACENTA: is grade I, posterior with lower edge completely covering the os .
- LIQUOR: is adequate for the period of gestation.

Fetal morphology for gestation appears normal.

- 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 2.0 mm (WNL).
- Ductus venosus shows normal flow & spectrum with positive "a" wave (PI ~1.13)

FETAL GROWTH PARAMETERS

CRL	71.9	mm	~	13	wks	3 days of gestation.
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- Estimated gestational age is 13 weeks 3 days (+/- 1 week). EDD by USG : 19.11.2025
- Internal os closed. Cervical length is WNL (30.0 mm).
- Baseline screening of both uterine arteries was done with mean PI ~ 1.72 (WNL for gestation).
- Date of last delivery 06.08.2020.
- Gestation at delivery of last pregnancy 41 weeks 0 days.

IMPRESSION:

- Single, live, intrauterine fetus of 13 weeks 3 days +/- 1 week.
- Gross fetal morphology is within normal limits.
- Low lying placenta with lower edge completely covering the os .

Follow up at 19-22 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)

Dr. Pooja Srivastava

MBBS

MS (Obstetrics & Gynaecology)
Reg No. MP-4298



- Ex. Resident Gynaecologist MY Hospital Indore.
- Trained in Obstetric Ultrasoundography, 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
opd 'hours only (Monday to Saturday)**



Mr. : MRS. MONIKA PRAJAPATI

Age/Sex : 26 Years / Female

LH-A-010276

Address : Misrod Bhopal

Mobile No.: 8871956406

Date : 19-May-2025

Jan 1973 or 1975 Tatty Thyrotoxic RP 121170
Pulse 102/60
SpO2 98%
wt 65-54kg
Jan Tats Thyrotoxic 58 y.o. w/ cys
Jan Tats Nausea 89 1m
o Cap Reebok 100
o DDI Foged 100
u bus Hanover Hwy Res 8mon
30y 1mon
Puff up now
Bruteflam gel for us

In Emergency Call : 9425005377

Email id : poojadr2003@gmail.com



Lotus Hospital

LOTUS HOSPITAL

M-351, Rajharsh Colony, Nayapura, Kolar main road, Bhonai

Ph.: 0755-4093322, 8085441332

Signature

First Trimester Screening Report

Prajapati Monika

Date of birth : 22 July 1997, Examination date: 17 May 2025

Address: hno. 12, patel mohalla misrod
Bhopal
INDIA

Referring doctor: DR. (MS) POOJA SHRIVASTAVA

Maternal / Pregnancy Characteristics:

Racial origin: South Asian (Indian, Pakistani, Bangladeshi).
Parity: 1; Deliveries at or after 37 weeks: 1.
Maternal weight: 63.3 kg; Height: 157.5 cm.
Smoking in this pregnancy: no; Diabetes Mellitus: no; Chronic hypertension: no; Systemic lupus erythematosus: dont know; Antiphospholipid syndrome: dont know; Preeclampsia in previous pregnancy: no; Previous small baby: no; Patient's mother had preeclampsia: no.

Method of conception: Spontaneous;

Last period: 05 February 2025

EDD by dates: 12 November 2025

First Trimester Ultrasound:

US machine: logiq f6. Visualisation: good.

Gestational age: 13 weeks + 2 days from CRL

EDD by scan: 20 November 2025

Findings	Alive fetus
Fetal heart activity	visualised
Fetal heart rate	167 bpm
Crown-rump length (CRL)	71.9 mm
Nuchal translucency (NT)	2.0 mm
Ductus Venosus PI	1.130
Placenta	posterior low
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: 1.72 equivalent to 1.120 MoM

Mean Arterial Pressure: 87.5 mmHg equivalent to 1.040 MoM

Endocervical length: 30.0 mm

Risks / Counselling:

Patient counselled and consent given.

Operator: DR. ANKITA VIJAYVARGIYA, FMF Id: 204664

Condition	Background risk	Adjusted risk
Trisomy 21	1: 831	1: 16614
Trisomy 18	1: 2105	<1: 20000
Trisomy 13	1: 6582	<1: 20000
Preeclampsia before 34 weeks		1: 1099