



Global Diagnostics

Sonography & Digital X Ray

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Reg. No. 2020/03/2389

Address : Shop No. G-7, Ground Floor, Anjuman Complex, Near Khan Pathology Opp. Governor Kothi, Main Road, Sadar Bridge Pillar No. 37, Nagpur. Contact No. : 70837 50761

Patient Name: NIKUNJ DESHPANDE

Date: 22/05/2025

Ref Phy: DR. SARIKA THAKRE

Age/Sex: 32 Years / FEMALE

OBSTETRIC NT SCAN

LMP:28-02-2025		▼GA(LMP):11w6d	▲ AUA:13w3d	EDD by LMP:05-12-2025
0	5	10	15	20 25 30 35 40

Dating	LMP	GA		EDD
		Weeks	Days	
By LMP	LMP: 28/02/2025	11	6	05/12/2025
By USG		13	3	24/11/2025

AGREED DATING IS (BASED ON LMP)

Real time USG of pelvis shows a gravid uterus with a single intra uterine gestational sac.

FETAL SURVEY

Placenta developing posterior partially covering the internal OS.

There is no evidence of subchorionic hemorrhage

Liquor -Normal the fetal pole and fetal activity are well appreciated.

Cervical length measures 4.6 cm. The internal OS is closed.

Small anterior wall subserosal fibroid of size 21 x 14 mm.

Fetal biometry

	mm	weeks	days
Crown Rump Length	66.2	12	6
Biparietal Diameter	21.7	13	4
Head Circumference	86.5	13	6
Abdominal Circumference	64.3	13	1
Femoral Length	12.1	13	4
Heart Rate	174 Beats Per Minute.		
The Embryo attains 40 weeks of age on	24/11/2025		
Nuchal Translucency	1.1 mm	11%	+
Nasal Bone	3.2 mm	71%	+
Hands, Limbs, Nasal Triangle Integrity, Bladder, Stomach & Umbilical Arteries	Seen		
Ductus Venosus Waveform	Normal waveform Pattern		

FETAL STRUCTURES VISUALIZED

HEAD / FACE / SPINE: The falx is well visualized and is in the midline. The IT is well visualized and is normal. The spine is seen as 2 lines at this stage. Both orbits are same. Retronasal triangle shows presence of nasal bones and normal mandibular gap. Frontomaxillary angle is normal.



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RESSION:

- Early single live intra uterine gestation of 13 week's 3 days- gestational age assign as per biometry.
Fetus is appropriate for gestational age. (expected by LMP 11 weeks 6 days)
- Nuchal translucency is normal.
- No gross congenital anomaly seen at this stage.
- Placenta is developing posterior partially covering the internal OS - suggestive of marginal placenta previa.
- Cervix measuring 4.6 cm, the internal OS is closed.
- Small anterior wall subserosal fibroid of size 21 x 14 mm.

Suggested dual marker correlation and anomaly scan at 18-20 weeks.

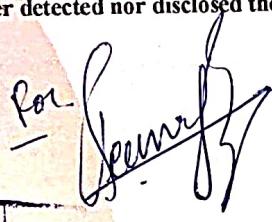
LEASE NOTE: 1) this is machine depended that to image oriented investigation. Hence many things can influence appearance and interpretation of image. 2) In case of disparity between report and clinical evaluation second opinion is advisable before commencing the final treatment. 3) This document is not for medicolegal purpose

Dr. REEMA PERVEZ declare that while conducting ultrasonography on this patient, I have neither detected nor disclosed the sex of her fetus to anybody in any manner.


DR. REEMA PERVEZ

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TRANSCRIBED BY: SOHAILED SYED

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AX: The heart is central in the thoracic cavity. Four chamber heart show equal size inflows. Presence of V connection of ductal arch and aortic arch) is noted on color Doppler in 3 vessel tracheal view.

MEN: The cord insertion in the anterior abdominal wall is well seen. The stomach is noted in the abdomen.

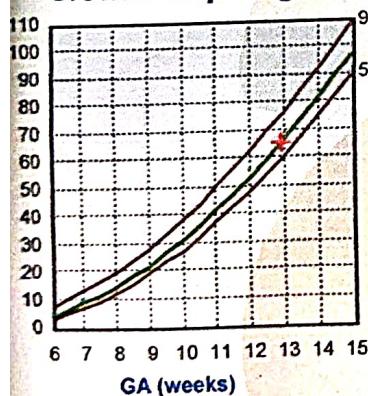
Urinary bladder is visualized. Two umbilical arteries seen.

EMITIES: Visualized upper limbs and lower limbs are normal bilaterally.

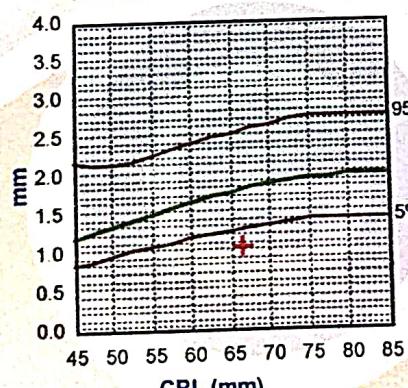
Uterine Artery Screening Doppler

Vessels	S/D	RI	PI	PI Percentile	Remarks
Right Uterine Artery	5.43	0.82	2.01	72.7%	No early Diastolic notch seen
Left Uterine Artery	3.59	0.72	1.44	23.2%	No early Diastolic notch seen
Mean Uterine Artery			1.73	52%	Normal
Ductus venosus	2.17		0.66		PSV= Normal waveform Pattern

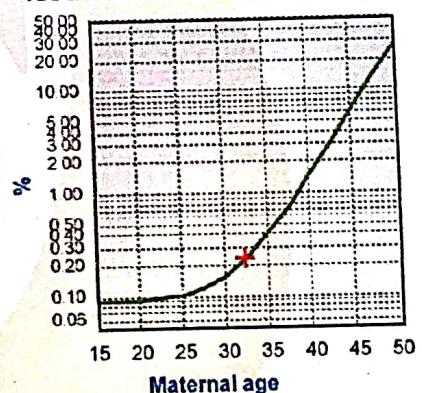
Crown-rump length



Nuchal translucency



1st trimester risk of Trisomy 21



1st trimester: Pre Ultrasound Maternal age risk for Trisomy 21 is 1 in 461

T21 Risk	
From - NT	1 in 2712