



Patient name	Mrs. HARCHANDANI KASHISH	Age/Sex	33 Years / Female
Patient ID	25809	Visit no	1
Referred by	Dr. Shefali Jain Ma'am	Visit date	27/05/2025
LMP date	27/02/2025, LMP EDD: 04/12/2025[12W 5D] C-EDD: 03/12/2025 [12W 6D]		

OB - First Trimester Scan Report

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

Maternal

Cervix measured 4.60 cm in length.

Internal os closed.

Right Uterine	1.68	—●— (55%)
Left Uterine	1.79	—●— (51%)
Mean PI	1.735	—●— (58%)

Fetus

Survey

Placenta - Posterior

Liquor - Normal

Fetal activity present

Cardiac activity present

Fetal heart rate - 164 bpm

Biometry

BPD 22.6 mm 13W 5D (70%ile)	HC 80 mm 13W 3D (50%ile)	AC 60 mm 12W 6D (56%ile)	FL 9.9 mm 13W (45%ile)
5% * 95%	5% * 95%	5% * 95%	5% * 95%

CRL - 65.8 mm(12W 6D)

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Aneuploidy Markers

Nasal Bone : Visualized

Nuchal translucency : 1.5 mm Normal.

Ductus venosus : No "a" wave reversal.

Tricuspid regurgitation : No.

Fetal Anatomy

- Head : Midline falx seen, intact calvariam, choroid plexuses imaged. IT imaged
- Face : Orbita, PMT imaged, appeared normal
- Heart : 2 inflows, confluent arches seen on colour flow
- Abdomen : Abdominal situs appeared normal
- Extremities : All 3 segments of both upper and lower limbs seen
No obvious structural abnormalities detected in the imaged organs for this period of gestation.

Impression

Intrauterine gestation corresponding to a gestational age of 12 Weeks 6 Days

Gestational age assigned as per biometry (CRL)

Menstrual age 12 Weeks 5 Days

Corrected EDD 03-12-2025

Placenta - Posterior

Liquor - Normal

Cervical length 4.6 cm .Internal os closed.

NT 1.5 mm - normal

Nasal bone - normal

DV - normal

No TR.

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erine artery doppler normal.

vised follow-up anomaly scan around 19-20 weeks.

Declaration of doctor:-

Dr. Avi Jain the undersigned hereby declare that while conducting ultrasonography on

s. Kashish Harchandani I have neither detected nor disclosed the sex of her fetus to
body in any manner.



R AVI JAIN

IBBS ,DMRD , DNB

consultant Radiologist

Reg. no 2017/09/4153

NOTE -It must be noted that detailed fetal anatomy may not always be visible due to technical
iculties related to gestational age, fetal position, amniotic fluid volume, fetal movements and
ominal wall thickness. Therefore all fetal anomalies may not necessarily be detected at every
mination. Some complex cardiac, CNS, GI, GU, hand, foot, ear, eye anomalies are difficult to detect by
USG has its own limitations. No finger counting done. This is not a fetal echo).