

**Name: MRS. KOMAL DUBEY****Date: 18/06/2025****Age/Sex: 24 Y/F****Ref by: DR. ABHAY KADU****OBSTETRIC ULTRA-SONOGRAPHY (ANOMALY SCAN)**

E/o single live intrauterine pregnancy with changing presentation and lie.  
Internal Os is closed. cervical length is normal. No fluid in cervical canal.

**Placenta** is anterior position. Well away from internal Os.

**Liquor** is adequate for this gestation.

Movements and cardiac activity regular.

Cardiac acceleration with movements normal (FHR-153).

**LMP: -02/02/2025****GA(LMP):- 19 W 3 D****EDD(LMP):- 09/11/2025**

<b>BPD</b>	<b>4.28 cm</b>	<b>19 W 0 D</b>
<b>HC</b>	<b>15.65 cm</b>	<b>18 W 4 D</b>
<b>AC</b>	<b>13.74 cm</b>	<b>19 W 1 D</b>
<b>FL</b>	<b>2.96 cm</b>	<b>19 W 1 D</b>

Average US gestational maturity 19 wks 0 days.

**EDD: 12/11/2025****EFW: 272.97 Gms****FETAL ANATOMY****Head**

Head appears normal in size and shape.

Midline falx, thalami and cavum septum pellucidum seen.

Lateral ventricles normal.

Cerebellum appears normal.

Cisterna magna appears normal.

No space occupying lesion.

**Face**

Fetal face is visualized in profile and coronal scans.

Both eyeballs, nose, lips appear normal.

**Thorax**

4chamber view of heart, outflow tracts and three vessel trachea view appear normal.

Fetal heart rate, rhythm appear normal measuring 170bpm.

Both lungs visualized.

No space occupying lesion.

**Abdomen**

Situs appeared normal.

Anterior abdominal wall appears normal.

Stomach appeared normal for gestation.

Umbilical cord appears normal and reveals two arteries and one vein.

Normal bowel pattern appropriate for gestational age.

**KUB**

Both kidneys appear normal in size.

Urinary bladder appeared normal.

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Spine

Spine is seen in coronal, transverse and sagittal planes.  
Normal alignment of vertebrae was recorded.  
No obvious space occupying lesion seen.

Limbs

All 4 limbs seen  
All long bones seen and appear normal for gestation.  
Fetal movements are present.

Impression:

- Single live intrauterine gestation, corresponding to Gestational age of 19 Weeks 0 Days in changing presentation with adequate liquor and growing appropriate for gestation.
- Placenta is anterior position.
- Sonic EDD:-12/11/2025
- Estimated fetal weight :according to BPD, HC, AC & FL is approximately-272.97gms.
- Detail fetal echo cardiography at around 23 to 24 weeks.

The mother has option of second trimester aneuploidy screening with quadruple marker test.

The mother understands that the ultrasonography or serum biochemical testing (double marker, quadruple marker tests) are indirect tests for screening of aneuploidies and the only confirmative test for aneuploidies is by invasive testing which carries a risk of miscarriage of 1 in 300.

**Dr. YASEEN AKBANI**  
**MBBS, DMRE**  
**Consultant Radiologist**

- This Is Well Explained To Mother And Relatives That All Fetal Anomalies May Not Always Be Imaged due To Fetal Position And Movements, Amniotic Fluid Volume, Abdominal Wall Thickness/Scars And Technically Due To The Sonography Machine And Probe.
- All congenital anomalies cannot be detected at anomaly scan. Information given is based on the findings of the scan done today. No obvious anomaly does not necessarily guarantee structural and functional normality of fetal organs today or in future. Fetal digits and ear examination is not a part of routine anomaly scan.
- Note: These Reports Are For Assisting Doctors/Physicians In Their Treatment And Not For Medical - Legal Purposes And Should Be Correlated Clinically.

**DISCLAIMER FOR ANOMALY SCAN**

General Disclaimer

- Patient's identity is based on her own declaration.
- This investigation has been done as per request of the referring doctor.

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