

- Multislice CT • Sonography • Colour Doppler
- Digital X-rays • Mammography • Digital OPG
- USG & CT guided Intervention Procedures • MSK USG
- Pathology • ECG • 2D Echo • Portable X Ray



NMMC/PCPNDT/212

| | | | |
|--------------|---|------------|-------------------|
| Patient name | Mrs. SUNITA BHONDAVE | Age/Sex | 27 Years / Female |
| Patient ID | 26052025-4723 | Visit no | 1 |
| Referred by | Dr. Haresh Shendge | Visit date | 26/05/2025 |
| LMP date | 23/02/2025, LMP EDD: 30/11/2025[13W 1D] | | |

OB - First Trimester Scan Report

Real time B-mode ultrasonography of gravid uterus done.

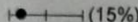
Route: Transabdominal


Single intrauterine gestation


Maternal

Cervix measured 2.90 cm in length.

Internal os is closed.

Right Uterine 1.16  (15%)

Left Uterine 1.94  (71%)

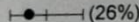
Mean PI 1.55  (49%)

Fetus

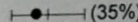
Survey

Placenta : Anterior
 Liquor : Normal
 Umbilical cord : Two arteries and one vein
 Fetal activity : Fetal activity present
 Cardiac activity : Cardiac activity present
 Fetal heart rate - 156 bpm

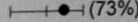
Biometry(Hadlock, Unit: mm)

CRL 63.2, 12W 5D  (26%)

Aneuploidy Markers (mm)

Nasal Bone 2.9  (35%)

Present

NT 1.76  (73%)

Normal

Ductus No "a" wave reversal

Venosus

Tricuspid No TR

Regurgitation

Fetal Anatomy

Skull / Brain appears normal

Intracranial structures appears normal

Choroid plexuses seen. The flax is well visualized and is in the mid line. The IT is well visualized and is normal.

Neck seen.

The spine is seen as two lines at this stage.

Pre maxillary triangle, orbits and normal mandibular gap seen.

Both lungs appeared normal.

The heart is central in the thoracic cavity.

Four chamber view and outflow tracts seen.

Abdominal wall and stomach bubble seen.

Bladder and kidney seen.

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Upper limbs and lower limbs seen.

Left ovary shows simpl ecyst of size 4.4 x 4.5 cm

Impression

Single intrauterine gestation corresponding to a gestational age of 12 Weeks 5 Days.

EDD assigned as per LMP

Corrected EDD : 30/11/2025.

Placenta - Anterior

Liquor - Normal

Left ovarian simple cyst.

Disclaimer

ULTRASONOGRAPHY/IMAGE SCANNING I, Dr. Tejal Chaudhari declare that while conducting ultrasonography on this patient, I have neither detected nor disclosed the sex of her foetus to anybody in any manner.

Thank you for the kind referral.

Name & sign. Of person conducting ultrasonography

Dr. Tejal Chaudhari

DMRE

NMMC/PNDT/212

NOTE: Not all fetal congenital anomalies can be detected by sonography. Detection of fetal congenital anomalies depends upon gestation age, amount of liquor, fetal position and various other technical factors.