

Patient name	Mrs. PRIYANKA SACHIN RASEGAONKAR	Age/Sex	33 Years / Female
Patient ID	D06393	Visit No	3
Referred by	Dr. KARUNA MURKEY	Visit Date	08/07/2025
LMP Date	15/04/2025 LMP EDD: 20/01/2026[12W]   C-EDD: 14/01/2026[12W 6D]		

## OB - First Trimester Scan Report

### Indication(s)

#### FIRST TRIMESTER NUCHAL TRANSLUCENCY AND ANOMALY SCAN

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal

Single intrauterine gestation

### Maternal

Cervix measured 3.00 cms in length.

Right uterine PI : 3.

Left uterine PI : 2.4.

Mean PI : 2.70 (> 99 %ile)

### Fetus

#### Survey

Placenta	: Posterior
Liquor	: Normal
Umbilical cord	: Two arteries and one vein
Fetal activity	: Fetal activity present
Cardiac activity	: Cardiac activity present Fetal heart rate - 145 bpm

#### Biometry(Mediscan, Hadlock)

BPD 22 mm 13W 2D			HC 78.57 mm 12W 5D			AC 62.86 mm 13W 2D			FL 8.5 mm 12W 3D		
5%	50%	95%	5%	50%	95%	5%	50%	95%	5%	50%	95%
*	*	*	*	*	*	*	*	*	*	*	*

CRL - 65 mm(12W 6D)

#### Aneuploidy Markers

Nasal Bone : seen

Nuchal translucency : 1.5 mm Normal.

Ductus venosus : normal flow.

Tricuspid regurgitation : No evidence of tricuspid regurgitation..

Mrs. PRIYANKA SACHIN RASEGAONKAR / D06393 / 08/07/2025 / Visit No 3

**Fetal Anatomy**

Head: normal, Neck: normal, Spine: normal, Face: normal, Thorax: normal, Heart: normal, Abdomen: normal, KUB: normal, Extremities: normal

**Head** :Both lateral ventricles seen. Intracranial translucency appeared normal.

**Face** :Orbits and Premaxillary triangle seen

**Heart** :Heart - Two inflows and outflows imaged in colour.

**Impression**

**INTRAUTERINE GESTATION CORRESPONDING TO A GESTATIONAL AGE OF 12 WEEKS 6 DAYS**

**GESTATIONAL AGE ASSIGNED AS PER BIOMETRY ( CRL )**

**MENSTRUAL AGE 12 WEEKS**

**CORRECTED EDD 14-01-2026**

**PLACENTA - POSTERIOR**

**LIQUOR - NORMAL**

**MATERNAL - BILATERAL MEAN UTERINE ARTERY DOPPLER SHOWS HIGH RESISTANCE TO FLOW**

**- (PI >95 %tile) S/O INCREASED RISK OF FETAL GROWTH RESTRICTION AND / OR PRETERM PRE ECLAMPSIA.**

**SUGGESTED**

1. COMBINED FIRST TRIMESTER SCREENING FOR DOWNS SYNDROME.(Blood test cut off CRL 84mm)
2. KINDLY CONSIDER STARTING LOW DOSE ASPIRIN IN VIEW OF INCREASED UTERINE ARTERY PI.  
(150 mg as per new ASPRE trial)
3. DETAILED ANOMALY SCAN AT 20 WEEKS.

(Please bring referral letter.)

**Note - Nuchal translucency NT was measured as per FMF (Fetal Medicine Foundation U.K. ) Guidelines.**

I Mrs. Priyanka R.

Declare that while undergoing Ultrasonography, I do not want to know the sex of my fetus.

**DECLARATION** - I declare that while conducting ultrasonography / image scanning, I have neither detected nor disclosed the sex of the fetus to anybody in any manner. All congenital anomalies and genetic conditions may not be detected on ultrasonography due to limitations like fetal position, amount of liquor, previous scars, Small VSDs, late appearance of few anomalies, TO fistula and structures that are not part of routine imaging protocol. Detailed fetal echo not included in this scan.

DR JAGRUTI MURKEY DNB DGO MBBS  
CONSULTANT FETAL MEDICINE SPECIALIST

**DR. JAGRUTI BHUSHAN MURKEY**  
DNB (OBS & GYN), DGO, MBBS  
FETAL MEDICINE SPECIALIST  
REG. NO. 2007 / 06 / 2480  
DAFFODILS, Mudholkar Peth, Amravati (M.S.)