

(3) Mrs. Monika Sahu

Age - 32 y/f

Quadruple Test

DOB - 9/2/1993

UMP - 27/2/2025

Height - 5'4"

Weight - 59 kg

# TEST REPORT

Reg No : D140725/020  
NAME : MRS. MONIKA SAHU

AGE : 32 YEARS

Date: 14.07.2025  
SEX : F

REF. BY : DR. MANSI GULATI

TYPED BY - RUPALI VERMA

## USG OBSTETRICS WITH TARGETED IMAGING FOR FOETAL ANOMALIES (TIFFA)

Single live intrauterine fetus with cephalic presentation is seen at the time of examination.

Liquor is adequate in amount.

The cardiac pulsations and fetal movements are well seen.

The fetal heart rate is = 157 b/minute.

The approximate gestational age is as follows:

|                         |                                       |
|-------------------------|---------------------------------------|
| Biparietal diameter     | = 4.43 cm corresponds to 19.3 weeks.  |
| Head circumference      | = 17.13 cm corresponds to 19.5 weeks. |
| Abdominal circumference | = 13.94 cm corresponds to 19.2 weeks. |
| Femur length            | = 2.97 cm corresponds to 19.1 weeks.  |
| TIB                     | = 2.57 cm corresponds to 19.1 weeks.  |
| FIB                     | = 2.66 cm corresponds to 19.2 weeks.  |
| HL                      | = 2.87 cm corresponds to 19.2 weeks.  |
| RAD                     | = 2.49 cm corresponds to 19.2 weeks.  |
| Ulnar                   | = 2.60 cm corresponds to 19.3 weeks.  |
| Cereb                   | = 2.02 cm corresponds to 19.3 weeks.  |

Placenta- Anterior wall, mid and lower uterine segment, low lying - approximately 2.4 cm distal to internal os. Grade-I maturity.

No obvious gross fetal anomaly is noticed in this examination.

The internal os and cervical canal are unremarkable.

The cervix is normal ( 4.4 cm).

P.T.O.



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TARGETED IMAGING FOR FETAL ANOMALIES (TIFFA)

|                   |                                                                          |
|-------------------|--------------------------------------------------------------------------|
| Cerebellum        | N                                                                        |
| Cisterna Magna    | N                                                                        |
| Lateral Ventricle | N                                                                        |
| Spine             | N                                                                        |
| Orb 1             | N                                                                        |
| Orb 2             | N                                                                        |
| Heart 4- Chamber  | N                                                                        |
| LVOT              | N                                                                        |
| RVOT              | N                                                                        |
| Stomach           | N                                                                        |
| Nasal bone        | N                                                                        |
| LIPS              | N                                                                        |
| Kidney            | Mild prominence of right pelvicalyceal system is seen, measuring 3.2 mm. |
| Bladder           | N                                                                        |
| Limbs             | N                                                                        |
| Cord              | 2 arteries                                                               |

Estimated Foetal Weight Is 285 Gms -/+ 42 Gms.

GA (LMP) - 19 wks + 04 days

EDD (LMP) - 04.12.2025

GA (AUA) - 19 wks + 02 days

EDD (AUA) - 06.12.2025

Bilateral uterine arteries are showing normal wave form and doppler indices.  
(Right uterine artery PI- 0.5, Left uterine artery PI- 1.3). Mean uterine PI- 0.9

P.T.O.

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**IMPRESSION:-**

- Single live intrauterine pregnancy cephalic presentation at the time of examination of 19 weeks + 02 days.
- Mild prominence of right pelvicalyceal system (Needs follow up).

(All measurement including foetal weight is subject to statistical variation. Fetal echo is not done.)

Note: - I Declare that while conducting USG, I have neither detected nor disclosed the sex of her fetus to any body in any manner.

Not all anomalies can be detected on sonography. Detection of anomalies is dependent on fetal position, gestational age. Maternal abdominal obesity and other technical parameters. Fetal limb anomalies not always detectable due to position. Evolving skeletal dysplasias cannot be detected, needs serial growth monitoring Follow up scanning and second opinion are always advisable. For detection of cardiac anomaly foetal echography is necessary. Ear anomalies cannot be detected.

Thanks for the reference,  
With regards,

Dr. Girish Verma  
MBBS, D.M.R.D.  
Consultant Radiologist

Dr. Suraj Kabra  
MBBS, D.N.B.  
Consultant Radiologist

Dr. Abhishek Das  
MBBS, MD.  
Consultant Radiologist

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MBBS, D.M.R.D DNB  
Consultant Radiologist

These reports are for assisting doctors, physicians in their treatment and not for medico legal purpose and should be related clinically.