

UHID	36379	TIME	2:03 PM
NAME	MRS. GUNJA SAHU	AGE / SEX	32 YRS / F
REF. BY	DR. ANUSHREE PADEGAONKAR, DGO, DNB	DATE	17.07.2025

USG OBSTETRICS - ANOMALY SCAN

Indication: Gestation age by USG, FHR, fetal weight, fetal position, liquor, fetal structural defects, placental location & grade.

MP: 19.02.2025

GA by LMP: 21W 01D

EDD By LMP: 26.11.2025

- There is a single, live, normal intrauterine gestation.
- Fetal movement and cardiac activity are present.
- Fetal heart rate : 147 bpm
- Presentation & lie : cephalic

FETAL BIOMETRY :

Parameters	Measurement(cm)	Gestational age	
		Weeks	Days
Biparietal Diameter(B.P.D.)	4.86	20	05
Head Circumference(H.C.)	18.2	20	04
Abdominal Circumference(A.C.)	15.4	20	04
Femur Length (F.L.)	3.39	20	05
Fibial Length	2.82	19	05
Fibula Length	2.89	20	03
Radial Length	2.53	20	01
Ulnar Length	3.18	21	03
Humerus Length	3.21	20	05

- Estimated Foetal Weight : 366 gms.
- Composite Gestational age(acc to sonography): 20 Weeks 04 Days
- E.D.D.(acc to sonography) : 31.11.2025
- Amniotic Fluid : Adequate (AFI- 16.7 cm)
- Placenta : Anterior in position & shows, Grade- I maturity. Not low lying. Normal retro-placental hypoechoic zone and no e/o retroplacental hematoma.
- No loop of cord is seen around fetal neck at the time of scan.
- Cervical length is normal (4.4 cm) and internal os is closed at the time of scan.

FETAL ANATOMY -

HEAD-

- Fetal cranium shows normal mineralization.
- The ventricular system is not dilated. Lateral ventricles at the level of atria measures about 4.8 mm in diameter.
- Cavum septum pellucidum is identified with midline position of the falx cerebri.



MRI
HIGHLY ADVANCED
1.5 TESLA MRI



CT SCAN
HIGHLY ADVANCED
160 SLICE MACHINE
NON INVASIVE
CORONARY ANGIOGRAPHY
की सुविधा उपलब्ध



**HIGHLY ADVANCED
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- Choroid plexuses & thalami appear normal in morphology.
- Posterior fossa appears normal.
- Trans-cerebellar diameter – 20.1 mm. Cisterna magna appear normal (5.6 mm).
- Nuchal fold thickness is within normal limits measures about (2.1 mm) in diameter.
- No identifiable intracranial lesion seen.

FACE-

Both orbits, nose (6.1 mm) and mouth appear normal. IOD – 10.9 mm, BOD – 30.8 mm

NECK-

Fetal neck appeared normal.

SPINE-

Fetal spine appears normal.

THORAX-

Both lungs are seen.

No obvious pleural or pericardial effusion seen.

No obvious space occupying lesion is seen in the fetal thorax.

HEART-

Heart appears in normal position.

Normal cardiac situs and axis.

Four chamber view is normal.

ABDOMEN

- Abdominal situs is normal.
- Fundal bubble is visualized.
- Normal bowel pattern appropriate for gestation seen. No evidence of ascites.
- Normal cord insertion noted in anterior abdominal wall which appear intact.

KUB-

- Right and left kidneys appear normal.
- Fetal urinary bladder appears normal.

EXTREMITIS-

- Long bones of the fetal limbs visualized & appear normal in mineralization & contours.
- Both feet are normal in orientation (Finger counting is not a part of this evaluation).



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2ND TRIMESTER RISK ASSESSMENT OF TRISOMY 21

Increased Nuchal fold.	-	Absent
Absent or hypoplastic nasal bone.	-	Absent
Ventriculomegaly.	-	Absent
Short femur.	-	Absent
Pyelectasis	-	Absent
Echogenic bowel.	-	Absent
Intracardiac echogenic focus.	-	Absent
ARSA	-	Absent

COLOR DOPPLER:-

Doppler parameters	PI
Umbilical artery	1.13
Left uterine	0.89
Right uterine	0.42
Mean uterine artery PI - 0.65 (normal)	

Three vessels cord seen. Two umbilical arteries and one umbilical vein are visualized.
Ductus venosus shows normal flow in color doppler.

IMPRESSION:

- Single live intra-uterine gestation of mean gestational age of 20 weeks 04 day (± 2 wks) in cephalic presentation at the time of scan.
- EFBW = 366 gms. EDD is based on LMP: 26.11.2025
- Amniotic fluid volume is adequate.
- No obvious sonologically demonstrable congenital anomaly is seen in present scan.
- Mean uterine artery PI is normal.

Advice - Follow up.

(I Dr. Prabhu Dutta Sahu, Declare that during USG scan on Mrs. Gunja Sahu I have neither detected nor disclosed the sex of her fetus to anybody in any manner).

DR. PRABHU DUTTA SAHU (MBBS.MD)
CONSULTANT RADIOLOGIST

Disclaimer: Patient identity is based on her own declaration. This investigation is done as per the request of the referring doctor. Proper history with details of previous scan medical history are to be provided. In spite of utmost care taken, all measurements are subjected to statistical variations. Diagnosis of ultrasound is based on various echoes and shadows produced by both normal and abnormal tissues. Disparity in diagnosis can occur due to technical pitfalls like false positive and false negative results. In case of disparity between report and clinical evaluation and/or laboratory tests, second opinion is always advisable before commencing treatment, not for medico-legal purpose.



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⇒ **FORWARDED**

WIGHT 57

HIGHT 5 FIT 2 INCH

9/7/1992

12:32 PM